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| Fill in this information to identify your case:                       |  |
|---|--|
| United States Bankruptcy Court for the: Northern District of Illinois |  |
| Case number (#known):   | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 |

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

AUG 10 2018

JEFFREY P. ALLSTEADT, CLERK INTAKE 3

Check if this is an amended filing

### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| P  | art+19. Identify Yourself  |   |   |
|----|--|---|---|
|    | Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | About Debtor 1:  Wynt  First name  Middle name  Cast name  Suffix (Sr., Jr., II, III) | About Debtor 2 (Spouse Only in a Joint Case):  First name  Middle name  Last name  Suffix (Sr., Jr., II, III) |
| Z. | All other names you have used in the last 8 years Include your married or maiden names.  | First name  Last name  First name   | First name  Last name  First name   |
|    |  | Middle name  Last name  | Middle name  Last name  |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | XXX - XX - Q Z G L G G G G G G G G G G G G G G G G G                                  | XXX — XX — OR  9 xx — XX —  |

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Debtor 1

| 1          | Unne          | Scott     |  |
|------------|---------------|-----------|--|
| First Name | / Middle Name | Last Name |  |

Case number (if known)

| encephon: | and the state of the |   |  |
|-----------|---|---|--|
|           |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
| 4.        | Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in<br>the last 8 years      | I have not used any business names or EINs.   | I have not used any business names or EINs.  |
|           | Include trade names and   | pusiness name   | Dusiness flame   |
|           | doing business as names   | Business name   | Business name  |
|           |   | EIN   | EIN  |
|           |   | EIN   | EIN  |
| 5.        | Where you live  | 5065 W. Gladys  | If Debtor 2 lives at a different address:  |
|           |   | Number Street  Add D  | Number Street  |
|           |   | Chicasu 7 60644   | City State ZIP Code  |
|           |   | County  | County   |
|           |   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|           |   | Number Street   | Number Street  |
|           |   | P.O. Box  | P.O. Box   |
|           |   | City State ZIP Code   | City State ZIP Code  |
| 6.        | Why you are choosing  | Check one:  | Check one:   |
|           | this district to file for<br>bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|           |   | I have another reason. Explain. (See 28 U.S.C. § 1408.)   | I have another reason. Explain. (See 28 U.S.C. § 1408.)  |
|           |   |   |  |
|           |   |   |  |

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Document

| Debtor | 4 |
|--------|---|

| Case number (if known) | ··· ··· |
|------------------------|---------|
|------------------------|---------|

#### Tell the Court About Your Bankruptcy Case

| 7.  | The chapter of the<br>Bankruptcy Code you<br>are choosing to file<br>under  | for Bank Cha Cha  | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.  Chapter 7  Chapter 11  Chapter 12  Chapter 13 |                                       |                  |                  |  |  |  |
|-----|---|---|--|---------------------------------------|------------------|------------------|--|--|--|
| 8.  | How you will pay the fee  | <ul> <li>I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.</li> <li>□ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A).</li> <li>□ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is</li> </ul> |  |                                       |                  |                  |  |  |  |
|     |   | pay   | he fee ir  | n installments). I                    | f you choose th  | is option, you m | r family size and you are unable to ust fill out the Application to Have the with your petition. |  |  |
| 9.  | Have you filed for bankruptcy within the last 8 years?  | No Yes.   | District _   |                                       | When             | MM / DD / YYYY   | Case numberCase number   |  |  |
| 10. | Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | No Yes.   | District _   |                                       | When             | MM/DD/YYYY       | Relationship to you  Case number, if known  Relationship to you  Case number, if known           |  |  |
| 11. | Do you rent your residence?   | ☐ No.<br>☑ Yes.   | No. 0  | r landlord obtained<br>Go to line 12. | ement About an E |                  | Against You (Form 101A) and file it as   |  |  |

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Debtor 1

| Wi       | inve        | Scott     |
|----------|-------------|-----------|
| rst Name | Middle Name | Last Name |

Case number (if known)

|                 | Are you a sole proprietor  | No.       | Go to Part 4.   |  |              |   |
|-----------------|--|-----------|---|--|--------------|---|
|                 | of any full- or part-time<br>business?   | -         | Name and location of bu   | siness   |              |   |
|                 | A sole proprietorship is a business you operate as an  |           |   |  |              |   |
|                 | Individual, and is not a separate legal entity such as   |           | Name of business, if any  |  |              |   |
|                 | a corporation, partnership, cr<br>LLC.   |           | Number Street   |  |              |   |
|                 | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.  |           |   |  |              |   |
|                 |  |           | City  |  | State        | ZIP Code  |
|                 |  |           | Check the appropriate b   | ox to describe your business:                                    |              |   |
|                 |  |           | ☐ Health Care Busines   | s (as defined in 11 U.S.C. §                                     | 01(27A))     |   |
|                 |  |           | ☐ Single Asset Real Es  | state (as defined in 11 U.S.C.                                   | § 101(51B)   | )   |
|                 |  |           | Stockbroker (as defin   | ned in 11 U.S.C. § 101(53A))                                     |              |   |
|                 |  |           | Commodity Broker (a   | as defined in 11 U.S.C. § 101                                    | (6))         |   |
|                 |  |           | None of the above   |  |              |   |
|                 | Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i><br>debtor?   | most rec  | ent balance sheet, stater                                       | ment of operations, cash-flow<br>xist, follow the procedure in 1 | statement,   | s debtor, you must attach your<br>and federal income tax return or i<br>116(1)(B).                                      |
|                 | For a definition of small business debtor, see   |           | <del>-</del>  | ,  |              | F   |
| •               | 11 U.S.C. § 101(51D).  | السط INO. | the Bankruptcy Code.  | 11, but Fam NOT a small bu                                       | siness debto | or according to the definition in   |
|                 | . , 0.0.0, 3 .0.(0.0.),  |           |   | 11 and I am a small busines                                      | debtor acc   | ording to the definition in the   |
|                 |  | Yes.      | I am filing under Chapter<br>Bankruptcy Code.                   |  |              |   |
|                 |  |           | Bankruptcy Code.  | erty or Any Property Tha   | ıt Needs I   | mmediate Attention  |
| Pa <sub>l</sub> | 1248 Report if You Own o   | or Have   | Bankruptcy Code.  |  | it Needs I   | mmediate Attention  |
| Pai             |  | or Have   | Bankruptcy Code.  Any Hazardous Prop                            |  | it Needs I   | mmediate Attention  |
| 9 Al            | Report if You Own of You Own of You own or have any property that poses or is alleged to pose a threat   | or Have   | Bankruptcy Code.  | erty or Any Property Tha   |              | mmediate Attention  |
| 4.  <br>4.      | Report if You Own of You Own of You own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to   | or Have   | Bankruptcy Code.  Any Hazardous Prop                            | erty or Any Property Tha   |              | der Calley and the opticity on a summarize measure of an except measure of the design and the opticity of the community |
| 9 al 4.         | Report if You Own of You Own of You own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to public health or safety?                            | or Have   | Bankruptcy Code.  Any Hazardous Prop                            | erty or Any Property Tha   |              |   |
| 4.  <br>        | Report if You Own of You Own of You own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to   | or Have   | Bankruptcy Code.  Any Hazardous Proportion  What is the hazard? | erty or Any Property Tha   |              |   |
| 4.              | Report if You Own of you own or have any property that poses or is alleged to pose a threat of imminent and dentifiable hazard to public health or safety? Or do you own any property that needs | or Have   | Bankruptcy Code.  Any Hazardous Proportion  What is the hazard? | erty or Any Property The   |              |   |

City

ZIP Code

State

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Debtor 1

| Wi           | mrl         | Scott     |  |
|--------------|-------------|-----------|--|
| First Name / | Middle Name | Last Name |  |

| Case number (if kno  | note).          |
|----------------------|-----------------|
| Case number (it knot | <sup>(10)</sup> |

#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again. About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankrupicy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed,

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| lam  | not   | required  | to  | receive  | 2  | briefing | abou |
|------|-------|-----------|-----|----------|----|----------|------|
| cred | it co | ounseling | ı b | ecause d | ٦Ē |          |      |

incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

Disability, My physical disability causes me to be unable to participate in a briefing in person, by phone, or

through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

i received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

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If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed,

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| i am | not   | required   | to   | receive   | a   | briefing | about |
|------|-------|------------|------|-----------|-----|----------|-------|
| cred | ii ce | มมกรดไม่กา | ı hı | SCALICE C | ٦f٠ |          |       |

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

O Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

| Wi         | inn         | Scott     |
|------------|-------------|-----------|
| First Name | Middle Name | Last Name |

Case number (# toown)

| P         | TLG: Answer These Ques   | stions for Reporting Purpose   | 28   |  |  |  |  |
|-----------|--|--|--|--|--|--|--|
| 16.       | What kind of debts do you have?  | 25 incurred by all individual printally for a personal, farmly, or nouseriou purposs.  |  |  |  |  |  |
|           | you nave:  |  |  |  |  |  |  |
|           |  | 16b. Are your debts primari<br>money for a business or inv   | lly business debts? Business debta<br>restment or through the operation of the   | s are debts that you incurred to obtain<br>a business or investment.   |  |  |  |
|           |  | No. Go to line 16c. Yes. Go to line 17.  |  |  |  |  |  |
|           |  | 16c. State the type of debts you   | owe that are not consumer debts or bu  | usiness debts.   |  |  |  |
| 17,       | Are you filing under<br>Chapter 7?   | No. I am not filling under Ch  |  |  |  |  |  |
|           | Do you estimate that after any exempt property is  | Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? |  |  |  |  |  |
|           | excluded and administrative expenses   | Ŭ No   |  |  |  |  |  |
|           | are paid that funds will be available for distribution to unsecured creditors?   | ☐ Yes  |  |  |  |  |  |
| 18.       | How many creditors do  | <b>Q</b> 1-49  | 1,000-5,000  | 25,001-50,000  |  |  |  |
|           | you estimate that you owe?   | ☐ 50-99<br>☐ 100-199<br>☐ 200-999  | <b>5</b> ,001-10,000<br><b>1</b> 0,001-25,000                                    | ☐ 50,001-100,000<br>☐ More than 100,000  |  |  |  |
| 19.       | How much do you  | \$ \$0-\$50,000  | ☐ \$1,000,001-\$10 million   | □ \$500,000,001-\$1 billion  |  |  |  |
|           | estimate your assets to be worth?  | \$50,001-\$100,000<br>\$100,001-\$500,000  | \$10,000,001-\$50 million<br>\$50,000,001-\$100 million                          | \$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion  |  |  |  |
| and Armen | oppy Literature, inc., i | ☐ \$500,001-\$1 million  | ☐ \$100,000,001-\$500 million  | More than \$50 billion   |  |  |  |
| 20.       | How much do you  | \$0-\$50,000   | \$1,000,001-\$10 million   | \$500,000,001-\$1 billion  |  |  |  |
|           | estimate your liabilities to be?   | ☐ \$50,001-\$100,000<br>☐ \$100,001-\$500,000  | \$10,000,001-\$50 million<br>\$50,000,001-\$100 million                          | \$1,000,000,001-\$10 billion<br>\$10,000,000,001-\$50 billion  |  |  |  |
|           |  | \$500,001-\$1 million  | 3100,000,001-\$500 million   | ☐ More than \$50 billion   |  |  |  |
| L         | nt7: Sign Below  |  |  |  |  |  |  |
| Fo        | r <b>yo</b> u  | correct.   | nd I declare under penalty of perjury tha  |  |  |  |  |
|           |  | of title 11, United States Code. I under Chapter 7.  | understand the relief available under e  | f, if eligible, under Chapter 7, 11,12, or 13 each chapter, and I choose to proceed  |  |  |  |
|           |  | If no attorney represents me and this document, I have obtained  | d I did not pay or agree to pay someon<br>and read the notice required by 11 U.S | e who is not an attorney to help me fill out<br>.C. § 342(b).  |  |  |  |
|           |  |  | th the chapter of title 11. United States  |  |  |  |  |
|           |  | I understand making a false star<br>with a bankruptcy case can rest<br>18 U.S.C. \$5,152, 1341, 1519, a  | ult in finas up to \$250,000, or imprisonn                                       | ng money or property by fraud in connection<br>nent for up to 20 years, or both.   |  |  |  |
|           |  | * Mynua  | flett ×  | والمستراة والمست |  |  |  |
|           |  | Signature of Debtor 1  | Signati  | ure of Debtor 2  |  |  |  |
|           |  | Executed on 8 ( 0 / MM / DD /  | YYYY Execut  | ed on MM / DD /YYY   |  |  |  |

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|----------|---|--|--|---|--|
| Debtor 1 | First Name Middle Name                                      | S <sub>(</sub>   | s o H  | Case number (# known),  |  |
|          | u if you are filing this<br>ptcy without an                 | should<br>themse   | understand that man lives successfully. Be   | ridual, to represent yourself in bar<br>y people find it extremely diffic<br>cause bankruptcy has long-ter<br>ngly urged to hire a qualified at   | cult to represent<br>rm financial and legal  |
| an atto  | are represented by<br>rney, you do not<br>o file this page. | To be su<br>technica<br>dismisse<br>hearing,<br>firm if yo | uccessful, you must correct, and a mistake or inact and because you did not floor cooperate with the cour case is selected for a   | ectly file and handle your bankrupto<br>ion may affect your rights. For exan<br>ile a required document, pay a fee o<br>ourt, case trustee, U.S. trustee, ban<br>udit. If that happens, you could lose<br>s, including the benefit of the auton   | cy case. The rules are very mple, your case may be on time, attend a meeting or hkruptcy administrator, or audit e your right to file another  |
|          |   | court. Even in your so property also den case, su cases ar | ven if you plan to pay a p<br>chedules. If you do not I<br>or properly claim it as ex<br>y you a discharge of all y<br>ch as destroying or hidin<br>e randomly audited to de | ad debts in the schedules that you a<br>particular debt outside of your bankr<br>ist a debt, the debt may not be disc<br>xempt, you may not be able to keep<br>your debts if you do something dish<br>ag property, falsifying records, or lyite<br>etermine if debtors have been accu<br>crime; you could be fined and im | ruptcy, you must list that debt<br>charged. If you do not list<br>p the property. The judge can<br>honest in your bankruptcy<br>ing. Individual bankruptcy<br>urate, truthful, and complete. |
|          |   | hired an<br>successi<br>Bankrup                            | attorney. The court will r<br>ful, you must be familiar  | corney, the court expects you to follow<br>the treat you differently because you<br>with the United States Bankruptcy (<br>ocal rules of the court in which your<br>tion laws that apply.   | ou are filing for yourself. To be<br>Code, the Federal Rules of  |
|          |   | Are you conseque  No                                       |  | ruptcy is a serious action with long-   | -term financial and legal  |
|          |   | Are you  |  | aud is a serious crime and that if yould be fined or imprisoned?  | our bankruptcy forms are   |
|          |   | Ø No<br>□ Yes. I   | Name of Person   | eone who is not an attorney to help  Preparer's Notice, Declaration, and  | you fill out your bankruptcy forms?  Signature (Official Form 119).  |
|          |   | have rea   | d and understood this no   | nat I understand the risks involved i<br>blice, and I am aware that filing a ba<br>y rights or property if I do not prope   | ankruptcy case without an  |
|          |   | Signature Date   | office bloom 1  OS /02/201  MM/DD /YYYY  | Signature of Date   | Debtor 2  MM / DD / YYYY   |

Contact phone

Cell phone

Contact phone

Cell phone

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| Debtor 1    Set   Set |  |
|---|--|
| Be as complete and accurate as possible. If two married people are filing together, both are equally respond information. Fill out all of your schedules first; then complete the information on this form. If you are filing your original forms, you must fill out a new Summary and check the box at the top of this page.   | nsible for supplying correct<br>amended schedules after you file   |
| Parcit: Summarize Your Assets   |  |
| 1. Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | Your assets Value of what you own  |
| 1b. Copy line 62, Total personal property, from Schedule A/B  | <u>s_1300_</u>   |
| 1c. Copy line 63, Total of all property on Schedule A/B   | \$ 1300  |
| Pari 2: Summarize Your Liabilities  | Хита 48 жылу жану жаратын түйнө кенене үшүн жана қашқанда (144) жайы 40 % жанда құрымда қазақтары жанда байы бай |
| <ol> <li>Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)</li> <li>Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule</li> </ol>  | Your liabilities  Amount you owe  D  |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | :17027   |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | + \$ 6749  |
| Your total li   | abilities \$ 23,176  |
| Pariss: Summarize Your Income and Expenses  |  |
| 4. Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I   | s <u>1700</u>  |
| Schedule J: Your Expenses (Official Form 106J)     Copy your monthly expenses from line 22c of Schedule J   | <u> </u>   |

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| Ωei | otor | 1 |
|-----|------|---|

Case number (if known)\_\_\_\_

|                                   | h14).                 | Answer These Questions for Administrative and Statistical Records  | 5   |   |
|-----------------------------------|-----------------------|--|---|---|
|                                   | □ No                  | ou filing for bankruptcy under Chapters 7, 11, or 13?  5. You have nothing to report on this part of the form. Check this box and submit this f  | orm to the court with your othe   | r schedules.  |
| THIS CARPA                        | Ye                    | S. THE CONTRACTOR OF THE PROPERTY OF THE PROPE | illa kundang 100-100-100 (100) (100), printspropriete 100 (100) (100) (100) (100) (100) (100) (100) (100) (100) | \$ \$ |
|                                   | \/                    | sind of debt do you have?  |   |   |
|                                   | 1511                  | ur debts are primarily consumer debts. Consumer debts are those "incurred by an<br>nily, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpo  | oses, 28 U.S.C. § 159.  |   |
| !                                 | You<br>this           | ur debts are not primarily consumer debts. You have nothing to report on this par s form to the court with your other schedules.   | t of the form. Check this box a   | nd submit   |
| 8.                                | From t<br>Form 1      | the Statement of Your Current Monthly Income: Copy your total current monthly in 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.   | come from Official  | s 1700  |
| n di chi sa di nadi nadi na di na | intell benin action o | WWW.NEW Start Month Control of the C |   |   |
| 9. (                              | Copy ti               | he following special categories of claims from Part 4, line 6 of Schedule E/F:   |   |   |
|                                   |                       |  |   |   |
|                                   | From                  | Part 4 on Schedule E/F, copy the following:  | Total çlaim   |   |
| ,                                 | 9a. Dor               | mestic support obligations (Copy line 6a.)   | s   |   |
| ļ                                 | 9b. Tax               | res and certain other debts you owe the government. (Copy line 6b.)  | <u>\$ 4232.00</u>   |   |
| ,                                 | 9c. Clai              | ims for death or personal injury while you were intoxicated. (Copy line 6c.)   | \$  |   |
| !                                 | 9d. Stud              | dent loans. (Copy line 6f.)  | , 5124.00   |   |
| ţ                                 | 9e. Obli<br>prio      | igations arising out of a separation agreement or divorce that you did not report as<br>rity daims. (Copy line 6g.)  | \$O   |   |
| 4                                 | 9f. Deb               | ots to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | + \$  |   |
| ę                                 | 9g. Tota              | al. Add lines 9a through 9f.   | · 9356,00   |   |

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| Fill in this in                 | formation to identify     | your case and th        | is filing: "                           |  |             |
|---------------------------------|---------------------------|-------------------------|--|--|-------------|
| Debtor 1                        | First Name                | Middle                  | Scott                                  |  |             |
| Debtor 2<br>(Spouse, if filing) |                           | Middle Name Middle Name | Last Name                              |  |             |
| United States I                 | Bankruptcy Court for the: | Northern District of    | f Illinois                             |  |             |
| Case number                     |                           |                         |  |  | F-72        |
|                                 | <del> </del>              |                         | ************************************** |  | Check amend |

Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Describe Each Residence, Building, Land, or Other Real Estate You Own or Haye an Interest In

|             | o. Go to Part 2.<br>es. Where is the property?   |  |  |                                       |
|-------------|--|--|--|---------------------------------------|
| 1.1.        | Street address, if available, or other description   | What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building         | Do not deduct secured claims or exemptions. Put<br>the amount of any secured claims on Schedule L<br>Creditors Who Have Claims Secured by Property |                                       |
|             | The state of the s | Condominium or cooperative  Manufactured or mobile home  | Current value of the entire property?  | Current value of th portion you own?  |
|             |  | Land   | \$   | \$                                    |
|             | City State ZIP Code  | Investment property Timeshare Other  | Describe the nature of interest (such as fee the entireties, or a life   | simple, tenancy by                    |
|             |  | Who has an interest in the property? Check one.  |  |                                       |
|             | County   | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is co (see instructions)   | mmunity property                      |
| wati        | ONE or house more than one list have   | Other information you wish to add about this it property identification number:                        | em, such as local  |                                       |
| you<br>1.2. | own or have more than one, list here: Street address, if available, or other description   | What is the property? Check all that apply.  Single-family home  Duplex or multi-unit building         | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Claim   | claims on Schedule D                  |
|             | one of sections in available, or other description   | Condominium or cooperative  Manufactured or mobile home  | Current value of the entire property?  | Current value of the portion you own? |
|             |  | Land   | \$   | \$                                    |
|             | City State ZIP Code  | Investment property Timeshare Other Who has an interest in the property? Check one.                    | Describe the nature of interest (such as fee sthe entireties, or a life  | imple, tenancy by                     |
|             | County   | ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another | Check if this is con (see instructions)  | amunity property                      |
|             |  | Other information you wish to add about this iter property identification number:                      | n, such as local   |                                       |

Doc 1 Filed 08/10/18 Entered 08/10/18 10:17:47 Page 11 of 54 Document Debtor 1 Case number (if know What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Land Investment property Describe the nature of your ownership City ZIP Code Timeshare interest (such as fee simple, tenancy by Other\_ the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles D-No ☐ Yes Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions, Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Debtor 1 and Debtor 2 only Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. 3.2. Make; Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Debtor 1 only Model Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another

Other information:

instructions)

☐ Check if this is community property (see

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Debtor 1 First Name Middle Name Last Name

Case number (# known)

| Year: Approximate mileage: Other information:  3.4. Make: Model: Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A'  | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions) |  | Current value of the portion you own?  \$   |
|--|--|--|---|
| Approximate mileage: Other information:  3.4. Make: Model: Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make: | Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)                             | Do not deduct secured claime amount of any secure Creditors Who Have Claim Current value of the entire property?               | sims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of th portion you own?                   |
| Other information:  3.4. Make:  Model: Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:                     | At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | \$   | sims or exemptions. Put<br>d claims on <i>Schedule D:</i><br>ns Secured by Property.<br>Current value of th<br>portion you own? |
| 3.4. Make:  Model: Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$                                    | d claims on Schedule Dras Secured by Property.  Current value of the portion you own?   |
| Model: Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$                                    | d claims on Schedule Dras Secured by Property.  Current value of the portion you own?   |
| Model: Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:   | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  | the amount of any secure Creditors Who Have Claim Current value of the entire property?  \$                                    | d claims on Schedule D:<br>ns Secured by Property.<br>Current value of th<br>portion you own?                                   |
| Year: Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers   | Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | Creditors Who Have Clain Current value of the entire property?  \$   | ns Secured by Property.  Current value of the portion you own?  |
| Approximate mileage: Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:  | Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)   | Current value of the entire property?  \$  | Current value of the portion you own?   |
| Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:   | At least one of the debtors and another  Check if this is community property (see instructions)  (Vs and other recreational vehicles, other vehicles, and access   | entire property?  \$ ssories   | portion you own?  |
| Other information:  Watercraft, aircraft, motor homes, A' Examples: Boats, trailers, motors, pers No Yes  4.1. Make:   | Check if this is community property (see instructions)  [Vs and other recreational vehicles, other vehicles, and access  | \$ssories  | •   |
| Vatercraft, aircraft, motor homes, A<br>Examples: Boats, trailers, motors, pers<br>No<br>Yes   | instructions)  Vs and other recreational vehicles, other vehicles, and acces   |  | \$  |
| Examples: Boats, trailers, motors, pers  No Yes  4.1. Make:  | FVs and other recreational vehicles, other vehicles, and access  |  |   |
| Year: Other information:   | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Claim<br>Current value of the<br>entire property? | claims on Schedule D:   |
|  | Check if this is community property (see instructions)   | \$   | \$  |
| you own or have more than one, list h  | ere:   |  |   |
| 4.2. Make:   | Who has an interest in the property? Check one.  | Do not deduct secured clai   | ms or exemptions. Put   |
| Model:   | Debtor 1 only  | the amount of any secured<br>Creditors Who Have Claim  |   |
| Year:  | Debtor 2 only  | Current value of the   |   |
| Other information:   | Debtor 1 and Debtor 2 only  At least one of the debtors and another  | entire property?   | portion you own?  |
|  | Check if this is community property (see instructions)   | \$   | \$  |

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Debtor 1

Document

Case number (# known)\_

| Part St Describe Your Personal and Household Items  |  |
|---|--|
| Do you own or have any legal or equitable interest in any of the following items?   | Current value of the portion you own? Do not deduct secured claims   |
| 6. Household goods and furnishings  | or exemptions.   |
| Examples: Major appliances, furniture, linens, china, kitchenware   |  |
| Pros. Describe Swa Jady lines, take   | s 70 U   |
| <ol> <li>Electronics         Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games     </li> </ol> |  |
| Yes. Describe tu, Cellphar, radid   | * 3W   |
| 8. Collectibles of value  | TOTAL CALL CAMPAGNET TANKACA (E  |
| Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles   |  |
| ☐ Yes. Describe   | \$   |
| 9. Equipment for sports and hobbies   | Constitution of the same of th |
| Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments   |  |
| ☐ Yes. Describe   | \$   |
| 10. Firearms  | mar parily, ragent   |
| Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No  | Notice and all the same distributions.   |
| Q Yes. Describe   | \$   |
| 11. Clothes  Examples: Everyday clothes, furs, feather coats, designer wear, shoes, accessories  No   | re COA, were warned.   |
| 1 Yes. Describe Utid Shut Ishow j'yours ) jackets   | \$ 250   |
| 12. Jewelry   |  |
| Examples: Everyday jewełry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver   |  |
| Yes. Describe   | \$   |
| 13. Non-farm animals  |  |
| Examples: Dogs, cats, birds, horses   |  |
| Yes. Describe   | \$   |
| 14. Any other personal and household items you did not already list, including any health aids you did not list   | entergrandense of  |
| SP No   |  |
| Yes. Give specific information  | \$   |

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached

for Part 3. Write that number here

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Debtor 1

Case number (# known)\_

| Parit 48 Describe Yo                                | our Financial Assets   |  |                     |   |
|---|--|--|---------------------|---|
| Do you own or have any                              | y legal or equitable interest is   | n any of the following?  |                     | Current value of the portion you own? Do not deduct secured claim |
|   |  | n partition and the statement of the statement between the statement of th |                     | or exemptions.  |
| 16. Cash Examples: Money you                        | r have in your wallet, in your ho  | me, in a safe deposit box, and on hand when you fi   | ile your petition   |   |
| No.   |  |  | , - , , <b>,</b>    |   |
|   |  |  | Cash:               | \$  |
| and other s   | savings, or other financial acco   | ounts; certificates of deposit; shares in credit unions,<br>multiple accounts with the same institution, list each   | , brokerage houses, |   |
| 0 No<br>10 Yes                                      |  | Institution name:  |                     |   |
|   | 17.1. Checking account:  | Pol C. Renta   |                     | s 6.00  |
|   | 17.2. Checking account;  |  |                     | \$  |
|   | 17.3. Şavings account:   |  | ,,,                 | \$  |
|   | 17.4. Savings account:   |  |                     | ¢   |
|   | 17.5. Certificates of deposit:   |  |                     | ¢   |
|   | 17.6. Other financial account:   |  |                     | <b>4</b>  |
|   | 17.7. Other financial account:   |  |                     | \$  |
|   | 17.8. Other financial account:   |  |                     | \$  |
|   | 17,9. Other financial account:   |  |                     | \$<br>\$  |
|   |  |  |                     |   |
| Examples: Bond funds,                               | or publicly traded stocks investment accounts with broken  | erage firms, money market accounts   |                     |   |
| Yes   | Institution or issuer name:  |  |                     |   |
|   | Address of the second s |  |                     | \$  |
|   | dem best, mellegele stransport, des son sanskiede statistiche blank beleiteren stepensen in der produktioning  | The state of the s |                     | \$  |
|   |  |  |                     | \$  |
|   |  |  |                     |   |
| 19. Non-publicly traded s<br>an LLC, partnership, a | tock and interests in incorpo<br>and joint venture   | rated and unincorporated businesses, including   | , an interest in    |   |
| No No   | Name of entity:  | %  | √ of ownership:     |   |
| Yes. Give specific information about                |  |  | 0% %                | \$  |
| them  |  |  | 0%%                 | \$  |
|   |  |  | 0%%                 | \$  |
|   |  |  |                     |   |

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| First Name   | Middle Name Last Name   | Case number (# known)  |
|--|---|--|
| - Adollard Addition the Adolese Medicina and an account of the control of the con | Lust Name   |  |
| 20. Government and cor   | orate bonds and other negotiable and  |  |
| Negotiable instrument  | include personal checks, cashiers' check  | ks, promissory notes, and money orders.  |
| ivori-negotiable iristrul  | ents are those you cannot transfer to sor   | neone by signing or delivering them.   |
| ₩.   | 1   |  |
| Yes. Give specific information about   | Issuer name:  |  |
| them   |   | \$   |
|  |   | \$   |
|  |   | \$   |
| 1. Retirement or pensio  | announte  |  |
|  |   | savings accounts, or other pension or profit-sharing plans   |
| 1 No   |   |  |
| ☐ Yes. List each   |   |  |
| account separately   | Type of account: Institution name:  |  |
|  | 401(k) or similar plan:   | \$   |
|  | Pension plan:   | \$   |
|  | IRA:  |  |
|  | Retirement account:   | \$   |
|  | **  |  |
|  | A 1500  | \$   |
|  |   |  |
|  | Additional account.   | \$   |
|  |   |  |
|  |   |  |
|  |   | V continue sendos or use from a composu  |
| Your share of all unuse<br>Examples: Agreements  | deposits you have made so that you ma   | ny continue service or use from a company<br>s (electric, gas, water), telecommunications                    |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you ma   | ny continue service or use from a company<br>s (electric, gas, water), telecommunications                    |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you ma<br>with landlords, prepaid rent, public utilitie  | s (electric, gas, water), telecommunications   |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you ma<br>with landlords, prepaid rent, public utilitie<br>Institution name or indi  | s (electric, gas, water), telecommunications   |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you ma<br>with landlords, prepaid rent, public utilitie<br>Institution name or indi<br>Electric:   | s (electric, gas, water), telecommunications   |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you ma<br>with landlords, prepaid rent, public utilitie<br>Institution name or indi<br>Electric:   | s (electric, gas, water), telecommunications   |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities  Institution name or individuals:  Electric:  Gas:  Heating oil:  | s (electric, gas, water), telecommunications  vidual:  \$\$\$  |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities Institution name or individuality.  Gas:  Heating oil:  Security deposit on rental unit;  | s (electric, gas, water), telecommunications   |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities  Institution name or individuals:  Electric:  Gas:  Heating oil:  Security deposit on rental unit;  Prepaid rent:   | s (electric, gas, water), telecommunications  vidual:  \$\$\$  |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities Institution name or individual Electric:  Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone:   | s (electric, gas, water), telecommunications  vidual:  \$\$\$  |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities  Institution name or individuals:  Electric:  Gas:  Heating oil:  Security deposit on rental unit;  Prepaid rent:  Telephone:  Water:                           | s (electric, gas, water), telecommunications  vidual:  \$\$\$  |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities Institution name or individual Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:                               | s (electric, gas, water), telecommunications  vidual:  \$\$\$  |
| Your share of all unuse<br>Examples: Agreements<br>companies, or others  | deposits you have made so that you mawith landlords, prepaid rent, public utilities Institution name or individual Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented fumiture:             | s (electric, gas, water), telecommunications  vidual:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |
| Your share of all unuse Examples: Agreements companies, or others  No Yes  | deposits you have made so that you mawith landlords, prepaid rent, public utilities  Institution name or individuals.  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented fumiture:  Other: | s (electric, gas, water), telecommunications  vidual:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |
| Your share of all unuse Examples: Agreements companies, or others  No Yes  | deposits you have made so that you mawith landlords, prepaid rent, public utilities Institution name or individual Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented fumiture:             | s (electric, gas, water), telecommunications  vidual:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |
| Examples: Agreements companies, or others  No  Yes   | deposits you have made so that you mawith landlords, prepaid rent, public utilities  Institution name or individuals.  Electric:  Gas:  Heating oil:  Security deposit on rental unit:  Prepaid rent:  Telephone:  Water:  Rented fumiture:  Other: | s (electric, gas, water), telecommunications  vidual:  \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ |

| Mahter | 4   |  |
|--------|-----|--|
| Debtor | - 1 |  |

| Wy         | me          | Scott Tourism  | Case number (if known)  |  |
|------------|-------------|--|---|--|
| First Name | Midale Name | Last Name  |   |  |
|            |             |  |   |  |
|            |             | The control of the co | Service control of company and report to a service of the company of the control |  |

| no depote to the first of the second | ويوار والمرور والمراوية والمرور والمراوية والمحاورة والموارع والمراور والمراورة والمراورة والمراورة والمراورة  | Control of the Contro |  |
|---|--|--|--|
| 24 Interests in an education IRA  | A, in an account in a qualified A  | ABLE program, or under a qualified state tuition i   | Drogram.   |
| 26 U.S.C. §§ 530(b)(1), 529A(   |  |  | •  |
| A-No  |  |  |  |
| ☐ Yes   | Institution name and description   | n. Separately file the records of any interests.11 U.S.  | .C. \$ 521(c):   |
|   | , , , , , , , , , , , , , , , , , , ,  |  | 3 02 ((0).   |
|   |  |  | \$   |
|   |  |  | \$   |
|   |  |  |  |
|   |  |  | The state of the s |
| 25. Trusts, equitable or future in  | terests in property (other than  | anything listed in line 1), and rights or powers   |  |
| exercisable for your benefit  |  |  |  |
| © No  | dan sadan samungi mendakan kecaman dalam kangkan bangan sebenjah panada panada kerama  |  |  |
| Yes. Give specific  |  |  |  |
| information about them  |  |  | <b>\$</b>  |
| 26 Detaute convenients traderes   |  |  | An alder generalization and  |
| 26. Patents, copyrights, tradema  | arks, trade secrets, and other i<br>mes, websites, proceeds from ro  |  |  |
| Z No  | mark makeman, breanadio maritro  | Action to the training agreements  |  |
| Yes. Give specific  | and and appeals of the state of |  | and the state of t |
| information about them  |  |  | <b>5</b>   |
| Ļ   | Wikimud Mikim ik da Paminum alphinday penganti raporo, a penoro, ma 2003, 2 do 6, 1 do 6, 15 mg/cm glycom gale,  |  | ***************************************  |
| 27. Licenses, franchises, and of  | her general intangibles  |  |  |
| Examples: Building permits, ex  | clusive licenses, cooperative ass  | ociation holdings, liquor licenses, professional licen   | ses  |
| 10 No   |  |  |  |
| Yes. Give specific  | and the manufacture of the second of the College College of the second of all money beginning to an electrical and the second of | т жана такжа такжа бара да на на принцине и дене на бара дене том на дане на принцина на п | granded as a readily of material grands are a  |
| information about them  |  |  | \$   |
| il.<br>Sangaran da sangaran ilangan da sangaran da sangaran da sangaran da sangaran da sangaran da sangaran da sangar   | anning terrapa na kang mengangkan kanan menangkan kanan kanan kanan kanan kanan kanan kanan kanan kanan kanan<br>Kanan kanan ka  | antangan katalogi ya atau katalogi ya pata katalogi a matalogi a maya katalogi a maya katalogi a matalogi a ma<br>Balangan sangan katalogi a matalogi a matalogi a matalogi a maya katalogi a matalogi a matalogi a matalogi a m   | e erman a san an general san ang san ang san ang san ang san an a   |
| Money or property owed to you   | ?  |  | Current value of the   |
|   |  |  | portion you own?<br>Do not deduct secured  |
|   |  |  | claims or exemptions.  |
| 28. Tax refunds owed to you   |  |  | :  |
| No.   |  |  |  |
| Yes. Give specific informati  | ion  | and proceedings and the control of communication of the control of control of the |  |
| about them, including   | whether  | Federal:   | \$   |
| you already filed the re<br>and the tax years   |  | State:   | \$   |
|   |  | Local:   | \$   |
|   | the state of the second se   |  |  |
| 29. Family support  |  |  | :  |
| •   | ım alimony, spousal support, chil  | d support, maintenance, divorce settlement, property   | settlement   |
| 2 No  | ger haats. Tilligaat al. diedelka seksoo oo oo oo oo keeping iyo qaaraa iyo qaasaan aay oo oo oo oo oo oo oo o   | Manufalan, indicates programmer, a supplication of the supplicatio |  |
| Yes. Give specific informati  |  |  |  |
|   |  | Alimony:   | \$   |
|   |  | Maintenance  | Y  |
|   |  | Support:   | \$   |
|   |  | Divorce settle   | , , _ , _ , _ , _ , _ , _ , _ , _ , _ ,  |
|   | The gray description of the gray of the gr | Property setti   | ement: \$  |
| 30. Other amounts someone owe   | as you   |  | <u> </u>   |
| Examples: Unpaid wages, disa  | bility insurance payments, disabil   | ity benefits, sick pay, vacation pay, workers' compe   | nsation,   |
| 7   | efits; unpaid loans you made to s  | omeone else  |  |
| Von Cinn and office information   | go dan na and markan kan kan and and and and an an and   | والمنافرة والمنافرة والمرافزة والمرا | Serie Apro American Garmania mag   |
| Yes, Give specific informati  | OB   |  | \$   |
|   | į  |  | And the Contract of the Contra |

Page 17 of 54 Document Debtor 1 Case number (irkn 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance D No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No PCP ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue D No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims D-NO Yes. Describe each claim. 35. Any financial assets you did not already list DINO Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here P 11 5 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned No. Q Yes. Describe.... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices No. Yes. Describe...

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Debtor 1

| First Name   | Middle Name Lost Name  | And the street of the second s |  |
|--|--|--|--|
| 10. Machinery, fixtures, e   | quipment, supplies you use in business, and tools of your trade  |  |  |
| No.  | 1. Company of the second secon |  |  |
| Yes. Describe  |  | to be a character or the property and a second of the con-   | may (figurity) (mg   |
| Tes. Describe  |  |  | \$   |
|  |  | the second statement as a second of the second   | the state of the processing and the state of |
| 41. Inventory  |  |  |  |
| Yes, Describe  |  | (MA NORTH CONTINUES CONTINUES AND ADMINISTRATION CONTINUES CONTINU | and the state of t |
|  |  | nderweister werdt versterer versen var   | 5  |
| 42. Interests in partnersh   | ips or joint ventures  |  |  |
| 51_No  | •  |  |  |
| Yes, Describe  | Name of white  |  |  |
|  |  | of ownership:  |  |
|  |  | %  | \$   |
|  |  | %  | \$   |
|  |  | %  | \$   |
| 3. Customer lists, mailin  | g lists, or other compilations   |  |  |
| ₩ No   | 3 And a combination  |  |  |
| Yes, Do your lists   | include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  |  |  |
| Q No   |  |  |  |
| 🔲 Yes. Desci   | ibe,   | Place recognization of processing beautiful and an expension of  | (and the object  |
|  |  |  | \$   |
| 4. Apre busciness related  | property you did not already list  | ANNO SERVICE OF THE S | n 1980/19.   |
| - Any business-related   | property you aid not already list  |  |  |
| Yes. Give specific   |  |  |  |
| information  |  | - Hit was proposed as a  | \$   |
|  |  | renamelia arianterizative/bels   | \$   |
|  |  |  | \$   |
|  |  |  | \$   |
|  |  |  | *  |
|  |  | tripperius de la companie de la comp | <b>5</b>   |
|  |  | Annual Sent Sent Sent Sent Sent Sent Sent Sent   | \$   |
| 5. Add the dollar value o  | f all of your entries from Part 5, including any entries for pages you have attache  | .d   |  |
| for Part 5. Write that n   | umber here   | ·*   | 3  |
| ter megleten han et e e highel Arabana barre verb ein a east active e a arabana, and   | er on the state of | and the same and t |  |
|  |  |  |  |
| ari 6: Describe An   | y Farm- and Commercial Fishing-Related Property You Own or Have a  | n Interest   | in.  |
| ir you own or  | have an interest in farmland, list it in Part 1.   |  |  |
| 2 Da uau aum ar baua au  |  | ,  |  |
| No. Go to Part 7.  | ry legal or equitable interest in any farm- or commercial fishing-related property?  | <b>!</b>   |  |
| Yes. Go to line 47.  |  |  |  |
|  |  |  |  |
|  |  |  | Current value of the portion you own?  |
|  |  |  | Do not deduct secured claims   |
| 7. Farm animals  |  |  | or exemptions.   |
| Examples: Livestock, po  | ultry, farm-raised fish  |  |  |
| 1 No   |  |  |  |
| Q Yes  |  | and the source outstandings and the  | about of the state |
| L vermore ave  |  |  | T Shinks do a m  |
| E<br>E   |  | na ja a altinomijalise kilolomijolas kilolominusias Akkalikina a kanary  | \$   |
| STREET, STREET |  |  |  |

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Case number (# known)

| <b></b>  |  |  |  |  |
|--|--|--|--|--|
| 48. Crops—either growing   | ig or harvested  |  |  |  |
| Yes. Give specific   | i a  | merena i encuentri kallim ili kallistiga i puliticali kormilara u respecții aleaniale, po landrin, encuen a spia   | ns. V Pari Salahharin (1915). (1916 - 1 Junjard Junyana Parisana Arabana Andre | Western to   |
| Information  | Equipmental to the policy of the second and the second second second design of the second sec |  | and a second of the supplication of the second of the seco | \$   |
| D No   | lipment, implements, machinery, fixtu  | res, and tools of trade  |  |  |
| ☐ Yes  | Amendment of the Control of Amendment and an amendment of the Control of the Cont | annipertural depresentativo (control o finitariam de tempo per major que forma forma (construe a construe de c   | والمراجعة والمواجعة والمعاونة والمعا |  |
|  | pages the effective and states and company on the page passages have also been stated as the equivalence of company and the entry of th | ig alle beginnline for primary states a combination (strong bringlin) ridge process and describes that their law of resembly process.  | ter year and all the second of | \$   |
| 50. Farm and fishing sup   | oplies, chemicals, and feed  |  |  |  |
| Yes  | A section of the sect | PARTIES TO AN AN EXPLORAGING LICENSELECTION OF MINISTER CONTINUES.   | kristishirak kalajirininak kir kafi inda yake ali insakirak nakjirangari kiri garang sasis ininakjalarahira in   | · · · · · · · · · · · · · · · · · · ·  |
|  | See Wister 100 and a state of the second sec |  |  | \$   |
| 51. Any farm- and comm   | ercial fishing-related property you did  |  |  | Appendix App |
| Yes. Give specific   |  | landinah bersilakan (Chanles da melanana barang terbahan berandagan a salah sa a saanan sa atau da kumay ina d   | -Mery facture foot-properties and a spiral of the military occurrence and the section of the properties depend on the foot-section pro-  | and the same of th |
| information  | The second of the second secon | والمواجعة والمستقدات والمستوار الموصوف والمستوار والمستقد والمستقد والمستقدات | gefel fore a new many of the mort finals of a fallow the results of a fall o | \$   |
| 52. Add the dollar value of for Part 6. Write that the state of the st | of all of your entries from Part 6, inclu<br>number here   | ding any entries for page  | s you have attached  | \$_ <u>C</u>   |
| and the area of the control of the c | AND THE CONTRACT OF STATE OF S | etwice teather and a contract of the contract  |  | The second secon |
| 2milia Describe  | All Property You Own or Have   | an interest in That  | You Did Not List Above   |  |
| 53. Do you have other or   | operty of any kind you did not already   | liot?  |  |  |
| Examples: Season tickets   | country club membership  | rnat:  |  |  |
| 2 No<br>Yes. Give specific   | out a many a set in the set of    | المرافع والمعارضة فالمحافظة والمستعملات والمهاوية والمهاوية والمهاوية والمستوان والمستوان والمستوان  | ner for year made i de productive for framerica fundado estructura, y tensos esfe de administrações professor, describações sons sons sons sons sons sons sons so  | ę  |
| information  |  |  |  | \$   |
|  | en garantanan menana menana menana kenang kejangarang bilan mengana menana mengangkan kelangan samana menang m   | Alfres Annahal Anniha Marija Marija Marija Anniha Annaha Annaha Annaha Annaha Annaha Annaha Annaha Annaha Annah  | **************************************   | \$   |
| 54. Add the dollar value o   | of all of your entries from Part 7. Write  | that number here   | .,   | \$   |
| andria anguerang a color a tana a constanting and a color and an angueran and an analysis  | ANNOUNCE COMPANY OF MALESCANIAN OF MALESCANIAN CONTRACTOR AND A MALESCANIAN AND AND AND AND AND AND AND AND AND A  |  | Control of the contro |  |
| airith List the Te   | otals of Each Part of this Form  | TE   |  |  |
| 5. Part 1: Total real estat  | te, line 2   | ***************************************  | ······································   | <u>\$</u>  |
| 6. Part 2: Total vehicles,   | line 5   | \$ <u> </u>  | _  | :  |
| 7. Part 3: Total personal  | and household items, line 15   | <u> </u>   |  |  |
| 8. Part 4: Total financial   | assets, line 36  | \$   | -  |  |
| 9. Part 5: Total business  | -related property, line 45   | \$   |  |  |
| 0. Part 6: Total farm- and   | l fishing-related property, line 52  | \$   | •  |  |
| 1. Part 7: Total other pro   | perty not listed, line 54  | +\$  | •  |  |
| 2. Total personal propert  | ty. Add lines 56 through 61  | s 1300   | Copy personal property total 💠   | +s 1300  |
| 3. Total of all property or  | s Schedule A/B. Add line 55 + line 62  | ***************************************  |  | s 1300   |
|  |  |  |  | 1  |

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| ebtor 1           | Pyne                 | سي   | Scott      |         |
|-------------------|----------------------|--|------------|---------|
| •                 | First Name           | Middle Name  | Last Name  |         |
| ebior 2           | ***                  |  |            |         |
| pouse, if filing) | First Name           | Middle Name  | Last Karne |         |
| nited States 8    | Bankruptcy Court for | r the: Northern District of li   | linois     |         |
| ase number        |                      | The second secon |            | ☐ Check |
| f known)          |                      |  |            | amend   |
|                   |                      |  |            | ancan   |

### Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, it you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| lim | mits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption rould be limited to the applicable statutory amount. |  |  |  |  |  |  |
|-----|---|--|--|--|--|--|--|
|     | art 1:  | Identify the Property You Claim as Exempt  |  |  |  |  |  |
| 1.  | Q You   | set of exemptions are you claiming? Check one only, even if your spouse is filling with you.  I are claiming state and federal nonbankruptcy exemptions, 11 U.S.C. § 522(b)(3)  I are claiming federal exemptions, 11 U.S.C. § 522(b)(2)   |  |  |  |  |  |
| 2.  | Brief (   | r property you list on <i>Schedule A/B</i> that you claim as exempt, fill in the information below, lescription of the property and line onCurrent value of theAmount of the exemption you claimSpecific laws that allow exemption use A/B that lists this propertyportion you own |  |  |  |  |  |

| Brief descript<br>Schedule A/B                      | ion of the property and line on<br>that lists this property | Current value of the portion you own | Amount of the exemption you claim                                 | Specific laws that allow exemption |
|---|---|--------------------------------------|---|------------------------------------|
|   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption.                            |                                    |
| Brief<br>description;<br>Line frem<br>Schedule A/B; | hosehold<br>b   | \$ 700                               | 100% of fair market value, up to any applicable statutory limit   | 755 FW 1/2 YOU (b)                 |
| Brief<br>description:<br>Line from<br>Schedule A/B: | electronics 7   | <u>\$ 30</u>                         | \$ \$ 300 any applicable statutory limit                          | 7357USS/12-/04/05                  |
| Brief description: Line from Schedule A/B:          | clotus<br>19  | * 227                                | S 100% of fair market value, up to any applicable statutory limit | 735FW57/2710/(b)                   |

|    | Schedule Peb. 45   | arry approads state of y farm                        |
|----|--|--|
| 3. | Are you claiming a homestead exemption of more than \$10       | 60,375?  |
|    | (Subject to adjustment on 4/01/19 and every 3 years after that | for cases filed on or after the date of adjustment.) |
|    | 10 No  |  |
|    | Yes. Did you acquire the property covered by the exemptio      | n within 1,215 days before you filed this case?      |
|    | □ No   | • • •  |

Yes

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Debtor 1

Case number (# known)\_

#### Additional Page

|                                      | of the property and line<br>that lists this property   |   | ent value of the<br>on you own   | Amount of the exemption you claim                                  | Specific laws that allow exemption       |  |
|--------------------------------------|--|---|--|--|--|--|
|                                      |  |   | the value from<br>dule A/B   | Check only one box for each exemption                              |  |  |
| Brief<br>description:                | rechyacet  | \$                                      | 0.00   |  |  |  |
| Line from Schedule A/B:              | 7.1  |   |  | 2100% of fair market value, up to any applicable statutory limit   | 735 FUS In 10                            |  |
| Brief<br>description: -<br>Line from |  | \$                                      |  | S = 100% of fair market value, up to                               |  |  |
| Schedule A/B: -                      |  |   |  | any applicable statutery limit                                     |  |  |
| Brief<br>description: -              |  | \$                                      |  | <b>G</b> \$  |  |  |
| Line from<br>Schedule A/B;           |  |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description: -              | and the state of t | \$                                      |  | <b>Q</b> \$  |  |  |
| Line from<br>Schedule A/B:           | merodianistico.  |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description: —              | And the state of t | \$                                      |  | Q \$   |  |  |
| Line from<br>Schedule A/B:           | marry, man anticy, mu  |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description:                |  | \$                                      | وسندو مساورت والإنجازية والإنجازية والمساورة المساورة الم | <b>U</b> \$  |  |  |
| Line from<br>Schedule A/B:           | omentus partinos de la compansa del compansa del compansa de la co |   |  | 100% of fair market value, up to<br>any applicable statutory limit |  |  |
| Brief<br>description: -              |  | \$                                      |  | <u> </u>   |  |  |
| Line from<br>Schedule A/B;           | <del></del>  |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description: —              |  | \$                                      | iggang gaman inimata Mangasa. Pagang tagang tag   | <b>D</b> \$  |  |  |
| Line from Schedule A/8:              | nonger and a contract of the c |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description: —              |  | S                                       |  | <b>D</b> s   | en e |  |
| Line from<br>Schedule A/B:           |  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description:                | againg hair ann ainm ann ann ann ann ann ann ann ann ann a   | \$                                      |  | <b>Q</b> \$  |  |  |
| Line from<br>Schedule A/B:           | <del></del>  |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description: —              |  | \$                                      | **************************************   |  |  |  |
| Line from<br>Schedule A/B: —         | nassegevia   |   |  | 100% of fair market value, up to any applicable statutory limit    |  |  |
| Brief<br>description: —              | and the second of the second o | \$                                      |  | Q \$   |  |  |
| Line from<br>Schedule A/B:           | SHAMMA SAN   | •                                       |  | 100% of fair market value, up to any applicable statutory limit    |  |  |

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| Fill in this information to identify your case  Debtor 1  First Name  Middle 1   | Scott   |   |  |  |
|--|---|---|--|--|
| Debtor 2 (Spouse, if filing) First Name Middle N   | larne Last Name   |   |  |  |
| United States Bankruptcy Court for the: Northern   | District of Illinois  |   |  |  |
| Case number(If known)  |   |   | Check  | f this is an   |
|  |   |   | amendo   |  |
| Official Form 106D   |   |   |  |  |
| Schedule D: Creditor   | s Who Have Claims Secur   | ed by Pro <sub>l</sub>  | perty  | 12/15  |
| information. If more space is needed, copy additional pages, write your name and cas  1. Do any creditors have claims secured by | , ,   | and attach it to this   | form. On the top of  | any  |
| Part III List All Secured Claims   |   |   |  |  |
| for each claim. If more than one creditor h  | nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. abelical order according to the creditor's name. | Column A  Amount of claim  Do not deduct the value of collateral  | Column B Value of collateral that supports this claim  | Courn C<br>Unsecured<br>portion<br>If any  |
| 2.1  | Describe the property that secures the claim:   | \$  | \$   | 5<br>5   |
| Creditor's Name  |   |   |  |  |
| Number Street  | As of the date you file, the claim is: Check all that apply   | •   |  |  |
| City State ZIP Code  | Contingent Unliquidated Disputed  |   |  |  |
| Who owes the debt? Check one.  | Nature of lien. Check all that apply.   |   |  |  |
| Debtor 1 only Debtor 2 only  | An agreement you made (such as mortgage or secured car loan)  |   |  |  |
| Debtor 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)  |   |  |  |
| At least one of the debtors and another  | Judgment lien from a lawsuit  |   |  |  |
| Check if this claim relates to a community debt  | Other (including a right to offset)   | -   |  |  |
| Date debt was incurred   | Last 4 digits of account number   | ALIGNARIA MENGALARIA MANGALARIA MANGARAN MANGARAN MENANGKAN MENANGKAN MENANGKAN MENANGKAN MENANGKAN MENANGKAN | CORRES TO OPE COLOT OF DESIGNATION AS THE STORY OF THE ST | NEW CONTRACTOR CONTRAC |
| 2.2 Creditor's Name  | Describe the property that secures the claim:   | \$  | \$   | <u> </u>   |
|  |   |   |  |  |
| Number Street  | As of the date you file, the claim is: Check all that apply   |   |  |  |
|  | Contingent  |   |  |  |
| All Dates  | Unliquidated  |   |  |  |
| City State ZIP Code  | Q Disputed  |   |  |  |
| Who owes the debt? Check one.  | Nature of tien. Check all that apply.   |   |  |  |
| Debtor 1 only Debtor 2 only  | An agreement you made (such as mortgage or secured car loan)  |   |  |  |
| Debtor 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)  |   |  |  |
| At least one of the debtors and another  | Judgment lien from a lawsuit  |   |  |  |
| Check if this claim relates to a community debt  Date debt was incurred  | Other (including a right to offset)   | MAC.  |  |  |
| екалыкты экономиялык мекенин кылып теменин кырып кырым жайын жайын жайын жайын байын байын жайын калып калып к                   | Last 4 digits of account number   |   | mengalak namasa san angang masaliga penganagan pengangan kanganak angan kangan angan sanasa kan  | ender omer interpretative in the control of the  |

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Debtor 1

| First Name |  | Scott<br>Last Name | Case number (#known) |
|------------|--|--------------------|----------------------|
|------------|--|--------------------|----------------------|

| Part i:                    | Additional Page After listing any entries on this by 2.4, and so forth.          | page, number them beginning with 2.3, followed                                       | Column A  Amount of claim  Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C<br>Unsecured<br>portion<br>If any   |
|----------------------------|--|--|---|---|--|
|                            |  | Describe the property that secures the claim:  | \$  | \$  | \$   |
| Creditor                   | 's Name  |  | 1   |   |  |
| Number                     | Street   |  |   |   |  |
|                            |  | As of the date you file, the claim is: Check all that apply.  Contingent             | •   |   |  |
| City                       | State ZIP Code   | Unliquidated Disputed  |   |   |  |
| Who ow                     | es the debt? Check one.  | Nature of lien. Check all that apply.  |   |   |  |
|                            | ior 1 only<br>Ior 2 only   | <ul> <li>An agreement you made (such as mortgage or secured<br/>car toan)</li> </ul> |   |   |  |
|                            | or 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)                                   |   |   |  |
| continue.                  | ast one of the debtors and another   | ☐ Judgment lien from a lawsuit   |   |   |  |
| ☐ Che                      | ck if this claim relates to a munity debt  | Other (including a right to offset)  | -   |   |  |
| Date dei                   | bt was incurred  | Last 4 digits of account number  |   |   |  |
|                            | 如此有一种,我们就是有一种的人,就是一种的人,就是是一种的人,就是是一种的人,就是一种的人,也是一种的人,也是一种的人,也是一种的人,也是一种的人,也是一种的人 |  | \$  | S S   | D<br>THE THE THE THE THE THE THE THE THE THE |
| Creditor                   | 's Name  | resolve the property that section the vigini.  | ·   | P   | P  |
|                            |  |  |   |   |  |
| Number                     | Street   |  |   |   |  |
| -telefon, kar-ewiteertener |  | As of the date you file, the claim is: Check all that apply.                         |   |   |  |
|                            |  | Contingent   |   |   |  |
| City                       | State ZIP Code   | ☐ Untiquidated ☐ Disputed  |   |   |  |
|                            | es the debt? Check one.  |  |   |   |  |
| 27-7A                      | ,  | Nature of lien. Check all that apply.  |   |   |  |
| Debte                      | or 3 only  | An agreement you made (such as mortgage or secured                                   |   |   |  |
|                            | or 1 and Debtor 2 only   | carloan)   |   |   |  |
|                            | est one of the debtors and another   | Statutory lien (such as tax lien, mechanic's tien)                                   |   |   |  |
| wat At lea                 | ast one or the debtors and another   | Judgment fien from a lawsuit   |   |   | 4  |
|                            | ck if this claim relates to a<br>munity debt                                     | Other (including a right to offset)  |   |   |  |
| Date del                   | ot was incurred  | Last 4 digits of account number  |   |   |  |
| Creditor                   | c Name   | Describe the property that secures the claim:  | \$  | \$\$  |  |
| Crounce                    |  |  |   |   |  |
| Number                     | Street   |  |   |   |  |
|                            |  |  |   |   | 1  |
|                            |  | As of the date you file, the claim is: Check all that apply.                         |   |   |  |
|                            |  | Contingent   |   |   |  |
| City                       | State ZIP Code   | Unliquidated Disputed  |   |   |  |
| Who ow                     | es the debt? Check one.  | Nature of lien. Check all that apply.  |   |   |  |
| ☐ Debto                    | or 1 only  | An agreement you made (such as mortgage or secured                                   |   |   |  |
|                            | or 2 only  | car loan)  |   |   | 1  |
|                            | or 1 and Debtor 2 only   | Statutory lien (such as tax lien, mechanic's lien)                                   |   |   |  |
|                            | est one of the debtors and another   | Judgment lien from a lawsuit   |   |   |  |
| п                          |  | Other (including a right to offset)  |   |   | į  |
|                            | ck if this claim relates to a<br>munity debt                                     |  |   |   |  |
| Date deb                   | ot was incurred  | Last 4 digits of account number  |   |   |  |
| A                          | dd the dollar value of your entries  | in Column A on this page. Write that number here:                                    |   |   | PART CONTRACTOR                              |
|                            | this is the last page of your form,<br>rite that number here:                    | add the doltar value totals from all pages.  |   |   | an conseque, p. p. p.                        |

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Debtor 1

| M        | Inc         | Scott     | Case number (# known) |
|----------|-------------|-----------|-----------------------|
| rst Name | Middle Name | Lasi Name | Section 1             |

| a | gency is try<br>ou have mo   | ing to collect from you to   | to be notified abou<br>r a debt you owe to<br>ny of the debts that   | someone else, list t<br>I vou listed in Part 1.  | r a debt that you already listed in Part 1. For example, if a collection he creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to |
|---|--|--|--|--|--|
|   |  |  |  |  | On which line in Part 1 did you enter the creditor?  |
|   | Name   | A ARTHUR AND A ARTHUR AND ARTHUR ARTH | THE PARTY OF THE P |  | Last 4 digits of account number  |
|   | Number   | Street   |  |  | •••  |
| , | City   |  | State<br>******************************  | ZIP Code   | TO THE PROTECTION AND AND THE PROTECTION OF THE PROTECTION OF THE PROTECTION OF THE AND  |
|   | J  |  |  |  | On which line in Part 1 did you enter the creditor?  |
|   | Name   |  | ***************************************  | PARTIES AND STATE OF THE STATE  | Last 4 digits of account number  |
|   | Number   | Street   |  |  |  |
|   | City   |  | State  | ZIP Code   | eres   |
|   | SOUTH LEAD TO SELECT THE SELECT T | rdarek halippia ayan muno 3200-areke karapak asapak ke 1502 ya ke 1502 kiba kiba ke ndapak ba da da ke kenapa.<br>Bara   | Perk delte-hiller Pallet Delterately (1977) (1978) et 2 % et de 2000 (1977) (1978) et 2000 (1977) (1978) et 20   | returnet i e e misteriordinassimistici, i e e plantitut metant furtimistanci que magnitus giorist  | On which line in Part 1 did you enter the creditor?  |
|   | Name   |  |  | N. TARLET STATE OF THE STATE OF | Last 4 digits of account number  |
|   | Number   | Street   | Transmission of the State of th |  | one.   |
|   |  |  |  |  |  |
|   | City   | and the profit has been all the transition of the state o | State  | ZIP Code   |  |
|   | A1.  |  | ATT-177-14-14-14-14-14-14-14-14-14-14-14-14-14-  |  | On which line in Part 1 did you enter the creditor?  |
|   | Name   |  |  |  | Last 4 digits of account number  |
|   | Number   | Street   |  |  | ••   |
|   | City   |  | State  | ZIP Code   | -  |
|   | PATER TO A PROPERTY OF A STREET, MATERIAL CO., A STREET, | eraneri Alberta di Hilli Senguerin da destrutti destrutti de ci munto di dicisto di circi di anticio, con aglicico, co a rizino.   | h (1875) 1870 1870 1870 1870 1871 1871 1870 1870   | न्तरिकारों, में राज्य <sub>वि</sub> र्वितर्भाष्ट्रीत्वर व्यक्तिक है हिएक स्थान है है है जिसके हैं कि उनके कर के उनके कर उनके क<br>इसके प्रमुख्या के प्रतिकार   | On which line in Part 1 did you enter the creditor?  |
|   | Name   |  |  | Andrew Commence of the Commenc | Last 4 digits of account number  |
|   | Number   | Street   | and the state of t | This bear was a second particle backers, the bear to a second particle backers, and the bear to a second partic |  |
|   | City   |  | Old  |  | ••   |
| 7 | OILY   | taangonsama ka kuliilista kangosoo kii yakee oo ka koosoo kii koosoo koo oo lada oo kastaa saabay ka kuliin ka   | State  | ZIP Code   | hard-market hard hard hard hard hard hard hard hard  |
| _ | Name   |  |  | and the second distance of the second distanc | On which line in Part 1 did you enter the creditor?  |
|   | ***************************************  |  |  |  | Last 4 digits of account number  |
|   | Number   | Street   |  |  |  |
|   |  |  |  | of parameter was transferred expressions, with a second state and the Westerland   | •  |
|   | City   | an sight file file for for following file follows in Alba dark following factors and as a sight gas a surjective   | State  | ZIP Code   |  |

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| Fi                                | ill in this information to identify your case:   |   |  |
|-----------------------------------|--|---|--|
| Do                                | ebtor 1 Wyne   | Scott   |  |
|                                   | First Name / Middle Name   | Last Namo   |  |
|                                   | pouse, if filing) First Name Middle Name   | Last Name   |  |
|                                   | nited States Bankruptcy Court for the: Northern District of  | of illinois   | ☐ Check if this is an  |
|                                   | ase number<br>(known)  |   | amended filing   |
| <u>O</u> 1                        | fficial Form 106E/F  |   |  |
| <b>S</b> (                        | chedule E/F: Creditors W   | ho Have Unsecured Claims  | 12/15  |
| List<br>A/B<br>cred<br>nee<br>any | t the other party to any executory contracts or under the contracts or under the contract of t | ,   | ry contracts on Schedule<br>rm 106G). Do not include any<br>perty. If more space is  |
| 200                               |  |   |  |
|                                   | Do any creditors have priority unsecured claims  No. Go to Part 2.   | against you?  |  |
|                                   | Yes.   | Na 1941 in 1940 in 1944 in 1964 in 1964 in 1964 in 1966 in 196  | e Norden de Maria (1975) (1974) (1975 |
|                                   | each claim listed, identify what type of claim it is. If a<br>nonpriority amounts. As much as possible, list the cl<br>unsecured claims, fill out the Continuation Page of F   | ditor has more than one priority unsecured claim, fist the creditor s<br>a claim has both priority and nonpriority amounts, list that claim her<br>laims in alphabetical order according to the creditor's name. If you<br>Part 1. If more than one creditor holds a particular claim, list the oth | e and show both priority and have more than two priority   |
|                                   | (For an explanation of each type of claim, see the in  | structions for this form in the instruction booklet.)  Total clai   | m Priority Nonpriority   |
|                                   | Harriagh Callectica Con  | V15   | amount amount  |
| 2.1                               | Priority Creditor's Name   | Last 4 digits of account number 3 5 8 \$ 9 6.   | N : 4372;  |
|                                   | Number Street N. USTW  | When was the debt incurred?   |  |
|                                   | Chican To 20130  | As of the date you file, the claim is: Check all that apply   |  |
|                                   | City State ZIP Code  | Contingent Unliquidated   |  |
|                                   | Who incurred the debt? Check one.  Debtor 1 only   | Disputed  |  |
|                                   | Debtor 2 only  | Type of PRIORITY unsecured claim:   |  |
|                                   | Debtor 1 and Debtor 2 only   | Domestic support obligations  |  |
|                                   | At least one of the debtors and another  Check if this claim is for a community debt   | Taxes and certain other debts you owe the government  |  |
|                                   |  | Claims for death or personal injury while you were intoxicated  |  |
|                                   | Is the claim subject to offset?  No Yes  | T Other. Specify Will will will are   |  |
| 2.2                               | AC AND Pay   | Last 4 digits of account number $3120$ s  | *  |
|                                   | Priority Craditor's Name  11 47 Broadway Ste / 00  Number Street   | When was the debt incurred? 11/10/7   | P.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,   |
|                                   | Notified Speed   | As of the date you file, the claim is: Check all that apply.  |  |
|                                   | City State ZIP Code  | Contingent Unliquidated   |  |
|                                   | Who incurred the debt? Check one.  | 2 Disputed  |  |
|                                   | Debtor 1 only  | Type of PRIORITY unsecured claim:   |  |
|                                   | Debtor 2 only  | Domestic support obligations  |  |
|                                   | Debtor 1 and Debtor 2 only  At least one of the debtors and another  | Taxes and certain other debts you owe the government  |  |
|                                   | Check if this claim is for a community debt  | Claims for death or personal injury while you were intoxicated  |  |
|                                   | Is the claim subject to offset?  No Yes  | Other. Specify  |  |

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Debtor 1

| W        | ne           | Scottement |
|----------|--------------|------------|
| est Name | Micrile Name | Last Nama  |

Case number (if known)\_\_\_\_\_

| Pa                       | 161 Your PRIORITY Unsecured Claims   | — Continuation Page   |  |
|--------------------------|--|---|--|
| An                       | Friendly Final Corp Priority Creditor's Name   Security Blvd Number Street  Baltimore MD 21207  City State ZIP Code  Who incurred the debt? Check one.  Broebtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt  Is the claim subject to offset?  No Pres  | Last 4 digits of account number B956  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify | Total claim Priority Nonpriority amount  s 12,741 s 12,795 s   |
|                          | Yes (комментерритеритерительного поможения полительных поможения |   |  |
|                          | Priority Creditor's Name  Number Street  | Last 4 digits of account number   | \$\$   |
|                          | Number Street  | As of the date you file, the claim is: Check all that apply.  |  |
|                          | City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only  | ☐ Contingent ☐ Unliquidated ☐ Disputed  Type of PRIORITY unsecured claim:   |  |
|                          | ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt   | <ul> <li>□ Domestic support obligations</li> <li>□ Taxes and certain other debts you owe the government</li> <li>□ Claims for death or personal injury while you were intoxicated</li> </ul>  |  |
|                          | Is the claim subject to offset?  No Yes  | Other. Specify  |  |
|                          | SIGNED BETWEEN COM BURNING BURNING BURNING STATE AND A SECTION AND AND AND AND AND AND AND AND AND AN  | Last 4 digits of account number   | SS   |
|                          | Priority Creditor's Name  Number Street  | When was the debt incurred?   | Y  |
|                          |  | As of the date you file, the claim is: Check all that apply.  |  |
|                          | City State ZIP Code  Who incurred the debt? Check one.   | Contingent Unliquidated Disputed  |  |
|                          | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt   | Type of PRIORITY unsecured claim:  Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated Other. Specify  | PR / Parish Balling in the Audies Shall ask and had been been been been ask and the state of the Audies Shall ask and the State of the Audies Shall ask and the Audies Shal |
| t No coming through page | Is the claim subject to offset?  No Yes  |   |  |

Filed 08/10/18 Entered 08/10/18 10:17:47 Page 27 of 54 Debtor 1 Case number (if known) Part 2 List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim As of the date you file, the claim is: Check all that apply. Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts ☐ No Other, Specify Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply, Contingent Inliquidated للر Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? ☐ No **A** Yes Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. ZIP Code Contingent Who incurred the debt? Check one. Unliquidated

Q No

Yes

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

At least one of the debtors and another

Check if this claim is for a community debt

4.3

Disputed

Student loans

Other Specify

Type of NONPRIORITY unsecured claim:

that you did not report as priority claims

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

00

they down

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Document 1

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Debtor 1

Case number (#known)

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

| Aftı | or listing any entries on this page, number them beginning with 4.4, | followed by 4.5, and so forth.   | Total claim   |
|------|--|--|---|
|      | Cash America   | Last 4 digits of account number 5060   | s/20  |
|      | Nonproof Conditions Name Footh, 11 Dr. Stell                         | When was the debt incurred? 7/20   |   |
|      | Number Street Street City VT 84108                                   | As of the date you file, the claim is: Check all that apply.   |   |
|      | City State ZIP Code  | Contingent   |   |
|      | Who incurred the debt? Check one.                                    | Unliquidated Disputed  |   |
|      | Debtor 1 only Debtor 2 only  | Type of NONPRIORITY unsecured claim:   |   |
|      | ☐ Debtor 1 and Debtor 2 only   | Student loans  |   |
|      | At least one of the debtors and another                              | Obligations ansing out of a separation agreement or divorce that   |   |
|      | Check if this claim is for a community debt                          | you did not report as priority claims  Debts to pension of profit-sharing plans, and other similar debts |   |
|      | Is the claim subject to offset?                                      | Other. Specify Vagday / Derr   |   |
|      | Y Yes  |  |   |
|      |  |  |   |
|      | 115 Dental thucal  | Last 4 digits of account number 1368   | \$5/24  |
|      | Nonphority Creditor's Name Fay VIII Par Down                         | When was the debt incurred? 2/2017   | * angen mangangan datang at paggang ang ang ang ang ang ang ang ang a |
|      | Number Street Chiroth 1/A 23323                                      | As of the date you file, the claim is: Check all that apply.   |   |
|      | City State ZIP Code  | Contingent   |   |
|      | Who incurred the debt? Check one.                                    | Unliquidated Disputed  |   |
|      | Debtor 1 only  |  |   |
|      | Debtor 2 only Debtor 1 and Debtor 2 only                             | Type of NONPRIORITY unsecured claim:   |   |
|      | At least one of the debtors and another                              | Student loans  Obligations arising out of a separation agreement or divorce that                         |   |
|      | ☐ Check if this claim is for a community debt                        | you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |   |
|      | Is the claim subject to offset?                                      | Other. Specify   |   |
|      | □ No Styles  |  |   |
|      |  |  | \$  |
|      | Nonpriority Creditor's Name  | Last 4 digits of account number  | T   |
|      | recipionity Creditor's realing                                       | When was the debt incurred?  |   |
|      | Number Street  | As of the date you file, the claim is: Check all that apply.   |   |
|      | City State ZIP Code  | Contingent Unliquidated  |   |
|      | Who incurred the debt? Check one.                                    | Unliquidated Disputed  |   |
|      | Debtor 1 only  |  |   |
|      | Debtor 2 only Debtor 1 and Debtor 2 only                             | Type of NONPRIORITY unsecured claim:   |   |
|      | At least one of the debtors and another                              | Student loans  |   |
|      | Check if this claim is for a community debt                          | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |   |
|      | Is the claim subject to offset?                                      | Debts to pension or profit-sharing plans, and other similar debts  Other, Specify                        |   |
|      | Q No   | Other. Specify   |   |
|      | ☐ Yes  |  |   |

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Debtor 1

| Cr        | me          | Scott Decument |
|-----------|-------------|----------------|
| irst Name | Middle Name | Lest Name      |

Case number (# known)\_

### Part 3:

#### List Others to Be Notified About a Debt That You Already Listed

| example,<br>2, then lis | if a collection age<br>t the collection a  | ency is trying to co<br>gency here. Simila  | ollect from you<br>rfy, if you have  | your bankruptcy, for a debt that you already listed in Parts 1 or 2. For<br>u for a debt you owe to someone else, list the original creditor in Parts 1 or<br>more than one creditor for any of the debts that you listed in Parts 1 or 2, list the<br>ns to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.   |
|-------------------------|--|---|--|--|
|                         |  |   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name                    |  |   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number                  | Street   | <del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>  |  | ☐ Part 2: Creditors with Nonpriority Unsecured Claims  |
|                         | ·  |   |  | Last 4 digits of account number  |
| City                    |  | State   | ZiP Code   |  |
| Name                    |  | <del>a maran a maka dhibaku bakka bakka ya mbaki ji kaki ili mar</del> janishi                                  | ****   | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name                    |  |   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number                  | Street   | n startin and an internal any starting which with a starting and a starting and a starting and a starting and a | angan ayan mahayayan yang ayang mahang mahanan ayan  | Part 2: Creditors with Nonpriority Unsecured Claims  |
|                         |  |   |  |  |
| City                    |  | State   | ZIP Code   | Last 4 digits of account number  |
| Name                    |  | ······································  |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| 142110                  |  |   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number                  | Street   |   | ,  | Part 2: Creditors with Nonpriority Unsecured Claims  |
|                         |  |   |  | Last 4 digits of account number  |
| City                    | Agraciacy, estimator, to include the control of the | Siate   | ZIP Cods   | any paolitri Chamban (no deprendent and propose conference and an artista particular and an artista particular and an artista particular and an artista particular and artista particul |
| Name                    |  |   |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Number                  | Street   |   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number                  | 3(1961   |   |  | Claims   |
|                         |  |   |  | Last 4 digits of account number  |
| City                    | ougrapheessefelustratifichterst televischtligtebiliet bestürf te Starts birdebeteile   | State   | ZIP Code   |  |
| Name                    | · · · · · · · · · · · · · · · · · · ·  | ······································  | ~  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| 45                      | Street   |   | man Apparatus property and the second | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number                  | Street   |   |  | Part 2: Creditors with Nonpriority Unsecured Claims  |
|                         |  |   |  | Last 4 digits of account number  |
| City                    | of the control of the trade of the property of the control of the control of the control of the control of the   | State   | ZIP Code   | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name                    |  | 44.pam.qay,q.mpaq.aa.m.ma.jam.p.m.aa.aq.m.,qam.amm.faa.ma.ervaa.am.   |  | •  |
| Number                  | Street   |   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured   |
| ****                    | The state of the s |   | ***************************************  | Claims   |
| City                    | and the state of t | State   | ZIP Code   | Last 4 digits of account number  |
|                         |  | gyadasinin maasiyainin palmamaanin falka malanda da alamainin ka 1970 oo na 1984 dh                             |  | On which entry in Part 1 or Part 2 did you list the original creditor?   |
| Name                    | •  |   |  | Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims   |
| Number                  | Street   | ***************************************   | and the second s | Part 2: Creditors with Nonpriority Unsecured   |
|                         |  |   |  | Claims   |
| City                    |  | State   | ZIP Code   | Last 4 digits of account number  |
|                         |  |   |  |  |

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Desc Main

Debtor 1

Wyn

Last Name

Case number (if known)

### Part 4:

#### Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

#### Total claims from Part 1

- 6a. Domestic support obligations
- 6b. Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- 6d. Other, Add all other priority unsecured claims, Write that amount here.
- 6e. Total. Add lines 6a through 6d.

### Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

#### Total claim

- 6a. s 4232
- 6c. s
- 6d. +s 12795
- 6e. s 17,027

#### Total claim

- 6f. \$ 5124
- 6h. €
- 61 + 1625
- 6j. s 6749

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| Debtes             | Work                   |                            | Contt                                  |  |
|--------------------|------------------------|----------------------------|--|--|
| Debtor _           | First Name             | Middle Name                | Las: Namo                              |  |
| Debtor 2           | -1                     |                            |  |  |
| (Spause If filing) | First Name             | Middle Name                | Last Name                              |  |
| United States E    | Bankruptcy Court for t | ne: Northern District of I | llinois                                |  |
| Case number        |                        |                            |  |  |
| (If known)         |                        |                            |  |  |
| ·····              |                        |                            | ************************************** |  |

#### Official Form 106G

Fill in this information to identify your case:

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| #1#<br>1544     | llaichteán an.                               | h Toga Pelotop (Peroto<br>Salah anak Kabupatèn   |  |  |  |
|-----------------|--|--|--|--|--|
|                 | Person o                                     | r company wil  | lh whom you  | have the contract or lease   | State what the contract or lease is for  |
| 2.1             | Degle Dagle afterweeter                      |  |  | an ann an t-aire gheire a 1966 i 1966 i 1966 ann an Airean an 1967 i 1967 an 1967 an 1967 an 1967 an 1967 an 1   |  |
| :               | Name   |  | <del></del>  |  | · <del></del>  |
|                 | Number                                       | Street   |  |  |  |
|                 | City   |  | State  | ZIP Code   |  |
| 2.2             |  |  |  |  |  |
|                 | Name   |  | ······································   |  |  |
|                 | Number                                       | Street   |  |  | The Applied Remarks  |
| i<br>i<br>i     | City   |  | State  | ZIP Code   |  |
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|                 | Name   | ······································   | - Maria - Mari   | and the second s | der Nachammann,  |
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Debtor 1

| Wynr        | C           | Scoti     |  | Case number (#know | n)                                      |
|-------------|-------------|-----------|--|--------------------|---|
| irst Name N | fiddle Name | Last Name | ······································ |                    | *************************************** |

|             | A  | dditional P   | age if You Ha  | ive More C   | ontracts or Leases  |  |
|-------------|--|---|--|--|---|--|
|             | Person o                                     | r company w   | ith whom you   | have the cor   | itract or lease   | What the contract or lease is for  |
| 2 <u>.2</u> | 2000-00-00-00-00-00-00-00-00-00-00-00-00     | aga kirintra shakita a gaga a gar   | Sant Sept of Set 1 and September 1   | and the second second second second  | a thread a thread part of a same a same a street, if the  |  |
|             | Name   |   |  |  |   |  |
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| Fill in this in                 | formation to ider       | ntify your case:             |           |                     |
|---------------------------------|-------------------------|------------------------------|-----------|---------------------|
| Debtor 1                        | Wygre                   | ·                            | _0#       |                     |
|                                 | First Name <sup>L</sup> | Middle Name                  | Last Name |                     |
| Debtor 2<br>(Spouse, if filing) | First Name              | Middle Name                  | Lasi Name |                     |
| United States I                 | Bankruptcy Court for    | the: Northern District of Il | finois    |                     |
| Case number<br>(If known)       |                         |                              |           | Check if this is ar |
|                                 |                         |                              |           | amended filing      |
| Official F                      | Form 106H               |                              |           |                     |
| 64A H S                         | R N 15 34.47            |                              |           |                     |

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and

| case  | e number (if known). Answer every question.  |  |
|-------|--|--|
|       | Do you have any codebtors? (If you are filing a joint of No  | case, do not list either spouse as a codebtor.)  |
| 2.    | Within the last 8 years, have you lived in a commun  | nity property state or territory? (Community property states and territories include exico, Puerto Rico, Texas, Washington, and Wisconsin.)  |
|       | ☐ No. Go to line 3.  | ,  |
|       | Yes. Did your spouse, former spouse, or legal equ  | ivalent live with you at the time?   |
|       | ☐ No   |  |
|       | Yes. In which community state or territory did y   | you live? Fill in the name and current address of that person.   |
|       | Name of your spouse, former spouse, or legal equivalent  | BETTA OF PERSONNELS AND AREA OF THE AREA O |
|       |  |  |
|       | Number Street  |  |
|       | City State   | ZIP Code   |
|       | •  |  |
|       |  | de your spouse as a codebtor if your spouse is filing with you. List the person is a guaranter or cosigner. Make sure you have listed the creditor on  |
|       |  | ficial Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D,   |
|       | Schedule E/F, or Schedule G to fill out Column 2.  |  |
|       | Column 1: Your codebtor  | Column 2: The creditor to whom you owe the debt  |
|       | COOLINI I TOUR DOCUMENT.   |  |
| ***** | - Tanaharan da kalendari kalendari kalendari kalendari kalendari kalendari kalendari kalendari kalendari kalend<br><b>1</b>  | Check all schedules that apply   |
| 3.1   |  | Schedule D, line   |
|       | Name   | Schedule E/F, line   |
|       | Number Street  | ☐ Schedule G, line   |
|       |  |  |
| 2.0   | City State   | ZIP Code   |
| 3.2   |  | Schedule D, line   |
|       | Name   | ☐ Schedule E/F, line   |
|       | Number Street  | ☐ Schedule G, line   |
|       | City State   |  |
| 3.3   | applimi inflantiquation activi inclinicativa arramentationalisativa activi anticativa activi a contratti costi<br>I  | ZIP Code   |
| ٥.٥   | Name   | Schedule D, line   |
|       | Natio  | ☐ Schedule E/F, line   |
|       | Number Street  | G Schedule G, line   |
|       | City State   | ZiP Code   |
|       | CIAID  CONTROL OF THE PROPERTY |  |

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Debtor 1

| ryne | Scott |
|------|-------|
|      |       |

Case number (if known)\_\_\_\_

|          | A                                     | dditional Page to List More Codebtors             |  |  |
|----------|---------------------------------------|---|--|--|
|          | Column 1                              | Your codebtor                                     | Column 2: The creditor to whom you   | owe the debt   |
| 3        | Wales Apply                           |   | Check all schedules that apply:  |  |
|          | Name                                  |   |  |  |
| :        | Name                                  |   | ☐ Schedule E/F, line   |  |
|          | Number                                | Street  | ☐ Schedule G, line   |  |
| <u></u>  | City                                  | State   | ZIP Code   |  |
| 3        |                                       |   | Schedule D, line   |  |
|          | Name                                  |   | ☐ Schedule E/F, line   |  |
|          | Number                                | Street  | ☐ Schedule G, line   |  |
|          | City                                  | Siale   | ZIP Code   |  |
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|          | Name                                  |   | Schedule D, line   |  |
| 1        |                                       |   | □ Schedule E/F, line   |  |
|          | Number                                | Street  | Schedule G, line   |  |
|          | City                                  | State   | ZIP Code   | entra i i income e compresso i indicata a compresso i accesso.   |
| 3        |                                       |   | Schedule D, line   |  |
| !        | Name                                  |   | ☐ Schedule E/F, line   |  |
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|          |                                       |   |  |  |
| 3        | City                                  | State   | ZÍP Code   | — an the construction of the second of the s |
|          | Name                                  |   | Schedule D, line   |  |
|          |                                       |   | ☐ Schedule E/F, line   |  |
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|          | City                                  | State   | ZIP Code   |  |
| 3        |                                       |   |  | and the second section of the second section of the second   |
|          | Name                                  |   | Schedule D, line   |  |
|          |                                       |   | ☐ Schedule E/F, line   |  |
|          | Number                                | Street  | Schedule G, line   |  |
|          | City                                  | State   | ZIP Code   | ***************************************  |
| 3        | Name                                  |   | Schedule D, line   |  |
|          |                                       |   | Schedule E/F, line   |  |
|          | Number                                | Street  | G Schedule G, line   |  |
| <u>γ</u> | City                                  | \$52/8<br>  | ZIP Code   | State of the contrate of the c |
| 3        |                                       |   | Schedule D, line   |  |
| :        | Name                                  |   | ☐ Schedule E/F, line   | :  |
|          | Number                                | Street  | Schedule G, line   |  |
| :        |                                       |   |  |  |
| ·        | City                                  | State  State                                      | ZP Code  | elian la produce plus chirane con a construor e gracino (segon esta co   |

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| Fill in this information to identify   | your case:<br>S C δ   |  |  |   |
|--|---|--|--|---|
| Debtor 1   | Middle Name   | Laut Name  |  |   |
| Debtor 2<br>(Spouse, if filing) First Name   | Middle Nama   | Lasi Name  | ayattiga dayattiga.  |   |
| United States Bankruptcy Court for the:  | Northern District of Illinois   |  |  |   |
| Case number(If known)  |   |  | Check if th  | is is:  |
|  |   |  |  | ended filing  |
|  |   |  |  | lement showing postpetition chapter 13 as of the following date:  |
| Official Form 106I   | •   |  | MM / DI  | D/ YYYY   |
| Schedule I: You  | ir Income   |  |  | 12/15   |
| supplying correct information. If yo   | ou are married and not fil<br>ise is not filing with you,<br>top of any additional pa | ing jointly, and your s<br>do not include inform | spouse is living with your<br>nation about your spou   | r 2), both are equally responsible for<br>ou, include information about your spouse.<br>use. If more space is needed, attach a<br>nown). Answer every question. |
| Fill in your employment information.   |   | Debtor 1   |  | Debtor 2 or non-filling spouse  |
| If you have more than one job, attach a separate page with information about additional  | Employment status   | - Employed                                       | ela fini fi fini fini di sul come a di sul come a come a completi fini del del come del come del come del come | ☐ Employed  |
| employers.  Include part-time, seasonal, or  |   | Not employed                                     | 0  | ☐ Not employed  |
| self-employed work.  | Occupation  | Patent A   | aus Kip  |   |
| Occupation may include student<br>or homemaker, if it applies.   | •   | Advocat  | te Health<br>Nelson  |   |
|  | Employer's name   | 8:2/   |  |   |
|  | Employer's address  | Number Street                                    | Nelson   | Number Street   |
|  |   | Chi(on go)                                       | ## 60657   | City State ZIP Code   |
|  | How long employed the   | ire? [man  | <b>~</b> '   |   |
| Parti-24 Give Details About  | Monthly Income  |  |  |   |
| Estimate monthly income as of spouse unless you are separated.  If you or your non-filing spouse hat below, if you need more space, at | iye more than one employ  | er, combine the informa                          |  | te \$0 in the space. Include your non-filing<br>r that person on the lines  |
|  |   |  | For Debtor 1   | For Debtor 2 or<br>non-filing spouse  |
| List monthly gross wages, sale<br>deductions). If not paid monthly,  |   |  | \$ 2000  | \$  |
| 3. Estimate and list monthly over  | time pay.   | 3.   | +s   | + \$  |
| 4. Calculate gross income. Add lin   | ne 2 + line 3.  | £,   | \$ 22W   | S   |

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Doçument

Debtor 1

| Cry        | Inc         | Scott     | Case number (if known) |
|------------|-------------|-----------|------------------------|
| First Name | Middle Name | Last Name |                        |

|  |                                    | For Debtor 1   | For Debtor 2 or  |   |
|--|------------------------------------|--|--|---|
|  |                                    | 77/10  | non-filing spouse  |   |
| Copy line 4 here   | . 🥕 4.                             | s 2200   | \$   |   |
| 5. List all payroll deductions:  |                                    |  |  |   |
| 5a. Tax, Medicare, and Social Security deductions  | 5a.                                | s 300  | \$   |   |
| 5b. Mandatory contributions for retirement plans   | 5b.                                | \$ 6   | \$   |   |
| 5c. Voluntary contributions for retirement plans   | 5c.                                | \$ 200   | \$   |   |
| 5d. Required repayments of retirement fund loans   | 5d.                                | \$ 0   | \$   |   |
| 5e. Insurance  | 5e.                                | \$ 0   | \$   |   |
| 5f. Domestic support obligations   | 5f.                                | \$ 0   | \$   |   |
| 5g. Union dues   | 5g.                                | \$ 0   | \$   |   |
| 5h. Other deductions. Specify:   | 5h.                                | + 5 0  | + ¢  |   |
| 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5l  |                                    | , 500  | 4  |   |
| b. Add the payroil deductions. Add lines 58 + 50 + 50 + 50 + 50 + 50 + 50 + 50 +   | h. 6.                              | \$   | \$   |   |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4.   | 7.                                 | s 170V   | \$   |   |
| 8. List all other income regularly received:   |                                    |  |  |   |
| <ol> <li>Net income from rental property and from operating a business,<br/>profession, or farm</li> </ol>   |                                    |  |  |   |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total  |                                    | . 0  |  |   |
| monthly net income.  | 8a.                                | <b>a</b>   | \$   |   |
| 8b. Interest and dividends   | 8b.                                | \$ <u></u>   | \$   |   |
| <ol><li>Family support payments that you, a non-filing spouse, or a depend<br/>regularly receive</li></ol>   | dent                               | _  |  |   |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.   | 8c.                                | \$ <u>\</u>  | \$   |   |
| 8d. Unemployment compensation  | 8d.                                | \$0  | \$   |   |
| 8e. Social Security  | 8e.                                | \$   | \$   |   |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistation that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: |                                    | s O  | \$   |   |
|  |                                    | . 0  | *  |   |
| 8g. Pension or retirement income   | 8g.                                | \$   | \$   |   |
| 8h. Other monthly income. Specify:   | _ 8h.                              | +\$  | + \$   |   |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.   | 9.                                 | \$ 0   | \$   |   |
| 10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.                                | <u>\$1700</u> +  | \$   | = \$ 170V   |
| 11. State all other regular contributions to the expenses that you list in Schi-<br>Include contributions from an unmarried partner, members of your household<br>friends or relatives.  |                                    |  | mates, and other   |   |
| Do not include any amounts already included in lines 2-10 or amounts that an   | e not av                           | ailable to pay expense   | as listed in Schedule J.   |   |
| Specify:   | rentificite fearenthical dynamics. |  | 11. <del>*</del>   | · s   |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The   |                                    |  | •  | 6 17 W  |
| Write that amount on the Summary of Your Assets and Liabilities and Certain  | statistic                          | ai intormation, if it ap   | plies 12.  | Combined  |
| 13. Po you expect an increase or decrease within the year after you file this  | s form?                            |  |  | monthly income  |
| No.  | Andrews State                      | mm) Kizantahan Japan Lagung mangkahan kening tahun keningnya kelalah pelandakan di | <sup>на</sup> Сентрин Сентрин и <del>придости Сентрин Сентрин Сентрин Сентрин Сентрин Сентрин Сен</del> трин Сентрин Сентри Сент | منابل سياسي سائه المنافعة |
| Yes, Explain;  |                                    |  |  |   |

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| Debtor 1 Debtor 2 (Spouse, if fil |   | Middle Name Last Name  Middle Name Last Name  Middle Name Last Name  ne: Northern District of Illinois | A supp<br>expens   | his is:<br>ended filing<br>plement showing pos<br>ses as of the followin  |  |
|-----------------------------------|---|--|--|---|--|
|                                   | Form 106J   | <del></del>  |  |   |  |
| Sche                              | dule J: Y   | our Expenses   | ilika dhiyidhadan ekin asaminna hisa ki iyo ku iyo ayan e asam akku u u yana aya a a ka ka a a | ZNAMNA PO NA GODINA NA PORTUGUIRO DE PROGRAMA NA PORTUGIRO DE PROGRAMA PORTUGIRO | 12/15  |
| information                       |   | possible. If two married people are fill<br>eded, attach another sheet to this form<br>on.             |  |   |  |
| Part 1:                           | Describe Your H   | lousehold  |  |   |  |
| i. Is this a                      | joint case?   |  | **************************************   |   |  |
|                                   | Go to line 2.<br>Does Debtor 2 live in                            | a separate household?  |  |   |  |
|                                   | ☐ No<br>☐ Yes. Debtor 2 mus                                       | t file Official Form 106J-2, Expenses for S  | Separate Household of Debtor 2.  |   |  |
|                                   | nave dependents?  | No Ves. Fill out this information for  | Dependent's relationship to<br>Debtor 1 or Debtor 2  | Dependent's age   | Does dependent live with you?  |
| Debtor 2.                         |   | each dependent   | da: at   |   | O No   |
| Do not st<br>names.               | ate the dependents'   |  | Jayet  | 3   | D Yes  No Yes  |
|                                   |   |  |  | www.  | No Yes   |
|                                   |   |  |  |   | ☐ Yes<br>☐ No  |
| expense                           | expenses include<br>s of people other that<br>and your dependents |  |  |   | U Yes  |
| Part 2:                           | Estimate Your Ong   | joing Monthly Expenses   |  |   |  |
|                                   | s of a date after the b   | our bankruptcy filing date unless you a<br>pankruptcy is filed. If this is a suppleme                  |  |   |  |
|                                   | •   | ion-cash government assistance if you<br>led it on Schedule I: Your Income (Offi                       |  | Yourexpe  | nanatanakan  |
| 4. The rent                       |   | p expenses for your residence, Include   | ***************************************  | 4. \$   | Andrew Committee |
| ŕ                                 | cluded in line 4:   |  |  | ••  |  |
| 4a. Re                            | al estate taxes   |  |  | 4a. \$ 0  | control of the communication o |
| 4b. Pro                           | operty, homeowner's, o  | r renter's insurance   |  | 4b. \$ <u>Q</u>   | M. Mary (Mark to the superficiency and superficiency and substitution of the s |
| 4c. Ho                            | me maintenance, repa  | ir, and upkeep expenses  |  | Ac, & Lucy  | والمناسب والمناسب والمناسب والمناسبة |
| 4d. Ho                            | meowner's association   | or condominium dues  |  | 4d. & 0   |  |

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|     |   |               | Your expenses |
|-----|---|---------------|---------------|
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | 5.            | \$            |
|     | Utilities:  |               |               |
| ь.  | 6a. Electricity, heat, natural gas  | 6a.           | · 700         |
|     | 6b. Water, sewer, garbage collection  |               | • 0           |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6b.           | \$ 100        |
|     |   | 6c.           | * 000         |
|     |   | 6d.           | \$ 200        |
| 7.  |   | 7.            | \$ 200        |
| 8.  |   | 8.            |               |
| 9.  | Clothing, laundry, and dry cleaning   | 9.            | \$ 100        |
| 10. | Personal care products and services   | 10.           | \$50          |
| 11. | Medical and dental expenses   | 11.           | \$ <u>U</u>   |
| 12. | Transportation. Include gas, maintenance, bus or train fare.  Do not include car payments.  | 12.           | \$ 700        |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.           | \$            |
| 14. | Charitable contributions and religious donations  | 14.           | \$            |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.   |               |               |
|     | 15a. Life insurance   | 15a.          | \$            |
|     | 15b. Health insurance   | 15b.          | § 0           |
|     | 15c. Vehicle insurance  | 1 <b>5</b> c. | s 100         |
|     | 15d. Other insurance. Specify:  | 15d.          | s <u>0</u>    |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  | 16.           | \$            |
| 17. | Installment or lease payments:  |               | a             |
|     | 17a. Car payments for Vehicle 1   | 17a.          | \$            |
|     | 17b. Car payments for Vehicle 2   | 17b.          | <u>\$</u>     |
|     | 17c. Other. Specify   | 17c.          | § 0           |
|     | 17d. Other. Specify:  | 17d.          | \$            |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.           | <u>s</u>      |
| 19. | Other payments you make to support others who do not live with you.   |               |               |
|     | Specify:  | 19.           | *             |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incomp  | 10.           |               |
|     | 20a. Mortgages on other property  | 20a.          | <u>\$</u>     |
|     | 20b. Real estate taxes  | 205.          | <u>\$</u>     |
|     | 20c. Property, homeowner's, or renter's insurance   | 20¢.          | \$            |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20¢.          | £             |
|     | 20s. Homeowner's association or condominium dues  | 20e.          | 8             |

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| ebtor 1     | First Name Last Name   | Case number (#known)  |      |
|-------------|--|---|------|
| Other, Sp   | pecify:  | 21. <b>+</b> \$   |      |
| . Calculate | your monthly expenses.   | pois train that and the property as a training                  |      |
|             | lines 4 through 21.  | 22a. \$   | 1850 |
| 22b. Copy   | y line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2   | 22b. <b>\$</b>  |      |
| 22c. Add    | line 22a and 22b. The result is your monthly expenses.   | 22c. \$   | 1830 |
| . Calculate | your monthly net incoms.   |   | 1700 |
| 23a. Cop    | y line 12 (your combined monthly income) from Schedule I.  | 23a. \$   | 4    |
| 23b. Cop    | y your monthly expenses from line 22c above.   | 23b\$   | (8)0 |
|             | tract your monthly expenses from your monthly income. result is your monthly net income.   | 23c. \$   | -150 |
| For examp   | spect an increase or decrease in your expenses within the year after you file<br>le, do you expect to finish paying for your car loan within the year or do you expe<br>payment to increase or decrease because of a modification to the terms of your r | ect your  |      |
| Yes.        | Explain here:  | 11aMain 14 - Innin Alaman 11 - 11 - 11 - 11 - 11 - 11 - 11 - 11 |      |
|             |  |   |      |

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| Fill in this in                        | nformation to iden   | tify your case:           |  |  |
|--|----------------------|---------------------------|--|--|
| Debtor 1                               | First Name           | Middle Name               | Scott<br>Last Name   |  |
| Debtor 2<br>(Spouse, if filing         | J) First Name        | Middle Name               | Last Name  |  |
| United States                          | Bankruptcy Court for | the: Northern District of | Illinois   |  |
| Case number<br>(If known)              |                      |                           | and the second and th |  |
| ······································ | *****                |                           | <del></del>  |  |

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below   |   |
|--|---|
| Did you pay or agree to pay someone who is NOT an att                                      | torney to help you fill out bankruptcy forms?         |
| <b>€</b> No  |   |
| Yes. Name of person  |   |
|  | Signature (Official Form 119).                        |
|  |   |
|  |   |
|  |   |
| Under penalty of perjury, I declare that I have read the s that they are true and correct. | summary and schedules filed with this declaration and |
| Mrs. a March   |   |
| × //////// ×   |   |
| Signature of Debtor 1  | Signature of Debtor 2                                 |
| Date 8/7/WW  | Date  |
| MM/ DD / YYYY  | MM/ DD / YYYY   |

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| Fill in this information to identify your case:   | att   |  |  |                                    |
|---|---|--|--|------------------------------------|
| First Name Middle Name  Debtor 2 (Spouse, if filing) First Name Middle Name  United States Bankruptcy Court for the: Northern District of III   | Lasi Name  Lasi Name                        |  |  |                                    |
| Case number (If known)  |   |  |  | Check if this is an amended filing |
| Official Form 107   | 8° 18 8°                                    | . W . B  |  |                                    |
| Statement of Financial Affairs  Be as complete and accurate as possible. If two marries information. If more space is needed, attach a separat number (if known). Answer every question.  Partill Give Details About Your Marital States  | ed people are filing<br>e sheet to this for | g together, both are equally<br>m. On the top of any addition      | responsible for supplyin   | g correct                          |
| <ol> <li>What is your current marital status?</li> <li>Married</li> <li>Not married</li> <li>During the last 3 years, have you lived anywhere on the last 3 years.</li> <li>Yes. List all of the places you lived in the last 3 years.</li> </ol>   | ,   |  |  | Dates Debtor 2                     |
| Entitlement reduction on a property state and with a contract and |   | Same as Debtor 1   | vita ta Maria da karang Mariang Milanda (18. min 1907)                     | Same as Debtor 1                   |
| Number Street   | From  | Number Street  |  | From                               |
| City State ZIP Code   |   | City   | State ZIP Code   |                                    |
| Number Street   | From  | Same as Debtor 1  Number Street                                    |  | FromTo                             |
| City Slate ZIP Code  3. Within the last 8 years, did you ever live with a spostates and territories include Arizona, California, Idaho  | ouse or legal equiv<br>o, Louisiana, Nevac  | Cily<br>/alent in a community prop<br>la, New Mexico, Puerto Rico, | State ZIF Code<br>erfy state or territory? (Co<br>Texas, Washington, and V | ommunity property<br>Visconsin.)   |
| Yes. Make sure you fill out Schedule H: Your Code   | ebtors (Official Forr                       | n 106H).   |  |                                    |

Part 2:

Explain the Sources of Your Income

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| Debtor 1          | First Name Middle Name Last I  | 0++ Name   | Case nu  | mber (if known)  |   |
|-------------------|--|--|--|--|---|
| Fill in t         | bu have any income from employmenthe total amount of income you received are filing a joint case and you have income.  S. Fill in the details.   | d from all jobs and all busi   | nesses, including part-ti  | me activities.   | ndar years?   |
|                   |  | Deptor 1   |  | Deptor 2   |   |
|                   |  | Sources of income<br>Check all that apply  | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)   |
|                   | rom January 1 of current year until<br>ne date you filed for bankruptcy:   | <ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>   | \$   | ☐ Wages, commissions, bonuses, tips☐ Operating a business  | \$  |
| Fo                | or last calendar year:   | Wages, commissions, bonuses, tips  | \$   | Wages, commissions, bonuses, tips  | \$  |
| (J                | anuary 1 to December 31,)  | Operating a business   |  | Operating a business   | T   |
| Fo                | or the calendar year before that:  | Wages, commissions, bonuses, tips  |  | Wages, commissions, bonuses, tips  | generation of a secondary and a secondary of the secondary of the secondary of the secondary of the secondary |
| (J                | anuary 1 to December 31,)  | Operating a business   | \$   | Operating a business   | \$  |
| gambli<br>List ea | foyment, and other public benefit paym<br>ng and lottery winnings. If you are filing<br>ch source and the gross income from e<br>s. Fill in the details.   | a joint case and you have  | e income that you receive  | ed together, list it only once   |   |
|                   |  | Debtor 1   |  | Debtor 2   | Spirit Programme a  |
|                   |  | Scurces of income<br>Describe below.   | Gross income from each source (before deductions and exclusions)   | Sources of Income<br>Describe below.   | Gross income from<br>each source<br>(before deductions and<br>exclusions)                                     |
|                   | rom January 1 of current year until<br>ne date you filed for bankruptcy:   |  | \$<br>\$<br>\$   |  | \$  |
| 100.000           | and the second s |  |  | ······································   | *   |
|                   | or last calendar year:   | ACADOMA BARRATE ADOMA SANCAN JAMAH MANAGAMAN AND AND AND AND AND AND AND AND AND A   | \$   | <del></del>  | \$  |
| (J                | lanuary 1 to December 31,  |  | \$   |  | \$<br>\$  |
| erika nise i      | enada kwa kisa e hadiki 190 mala e - e kiba e e e pare e e kao e na enderadi ya Marikena Marikena (ha e baaza  | e de la companya del companya de la companya del companya de la co | The second secon | The Martin and Mark Discount of the Marks  | ,   |
|                   | or the calendar year before that:  |  | S  | The state of the s | \$  |
| (J                | fanuary 1 to December 31,)   | <del></del>  | \$   | general and the plant of the transfer for the control of the contr | \$  |

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Debtor 1

| Wi    | Inve                   | Scott |
|-------|------------------------|-------|
| F 1 & | P. C. at all Alexander |       |

Case number (if known).

|        | First Name Middle Na   | me  | Last Name  |  |                     |                     | 1 V   |                       |
|--------|--|---|--|--|---------------------|---------------------|---|-----------------------|
|        |  |   |  |  |                     |                     |   |                       |
| art 3: | List Certain Paym  | ents You  | Made Befo  | re You Filed   | for Bankruptc       | У                   |   |                       |
|        |  |   |  |  |                     |                     |   |                       |
|        | ner Debtor 1's or Deb  |   | •  |  |                     |                     |   |                       |
| ☐ No.  | "incurred by an indivi   | idual prima   | rily for a perso   | nal, family, or h  | susehold purpose    | e."                 | lefined in 11 U.S.C. § 101                                      | (8) as                |
|        | During the 90 days b   | erore you r   | неа тог рапкп.   | ірісу, ака уой ра  | y any creditor a t  | otal of \$6         | ,425° or more?  |                       |
|        | No. Go to line 7.  |   |  |  |                     |                     |   |                       |
|        | total amoun  | t you paid I  | hat creditor. D  | o not include pa   | yments for dome     | estic supp          | more payments and the ort obligations, such as bankruptcy case. |                       |
|        |  |   |  |  |                     |                     | r the date of adjustment.                                       |                       |
| Yes    | . Debtor 1 or Debtor   | 2 or both h   | nave primarily   | / consumer det   | ts.                 |                     |   |                       |
|        | During the 90 days b   |   |  |  |                     | otal of \$6         | 00 or more?   |                       |
|        | No. Go to line 7.  |   |  |  |                     |                     |   |                       |
|        |  | ach ceadita   | e to subcom ico.   | , anid a intal of C  | END or more and     | l tha tatal         | amount you paid that  |                       |
|        | creditor, Do   | not include   | payments for   | domestic suppo   | ort obligations, su | ich as chi          | ld support and  |                       |
|        | alimony. Als   | o, de not ir  | nclude payme   | nts to an attorne  | / for this bankrup  | tcy case.           |   |                       |
|        |  |   |  | Dates of   | Total amount pa     | aid                 | Amount you still owe  | Was this payment for. |
|        |  |   |  | payment  |                     |                     |   |                       |
|        |  |   |  |  | \$                  |                     | \$  | ☐ Mortgage            |
|        | Creditor's Name  |   |  |  |                     |                     |   | Car                   |
|        | Number Street  | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,               | or annual section of the section of  |  |                     |                     |   | Credit card           |
|        |  |   |  |  |                     |                     |   | Loan repayment        |
|        |  |   |  | The Tarthau Control of the Control o |                     |                     |   | Suppliers or vendor   |
|        | City   | State   | ZIP Code   |  |                     |                     |   | Other                 |
|        |  |   |  |  |                     |                     |   |                       |
|        |  |   |  |  | \$                  |                     | \$  | ☐ Mortgage            |
|        | Creditor's Name  | ······································                | delaying and and an analysis a   | ACCORDING TO STREET AND ACCORDING TO ACCORDING TO STREET AND ACCORDING TO STREET AND ACCORDING TO STRE |                     | menuscularitaties e | 7   | Car                   |
|        |  |   |  | ***************************************  |                     |                     |   | Credit card           |
|        | Number Street  |   |  |  |                     |                     |   | Loan repayment        |
|        |  |   | ***************************************  |  |                     |                     |   | Suppliers or vendor   |
|        |  |   | and an arrange of the second s |  |                     |                     |   | Other                 |
|        | City   | State   | ZIP Code   |  |                     |                     |   |                       |
|        | \$ MANUFES 1995 - 172 , 675 1981 MANU  | ,   | w. e.ee  | and the second of the second   |                     |                     | and the control of a supplementary of the control               |                       |
|        | Creditor's Name  | nghin jirayanayay jirah mashasadiji yirah maharara sa | **************************************   | months to construct the second | \$                  |                     | £   | <b>U</b> Mortgage     |
|        |  |   |  |  |                     |                     |   | Car                   |
|        | Number Street  | **************************************                |  | witness  |                     |                     |   | Credit card           |
|        |  |   |  |  |                     |                     |   | Loan repayment        |
|        | A spiritual and the state of th | ***************************************               |  | handered that the second of the  |                     |                     |   | Suppliers or vendors  |
|        | City   | State   | ZiP Code   |  |                     |                     |   | Other                 |

City

ZIP Code

State

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| hin 1 year before you filed for bankruptcy, did<br>ders include your relatives; any general partners;<br>porations of which you are an officer, director, pers<br>int, including one for a business you operate as a shas child support and alimony. | relatives of any goson in control, or o  | eneral partners; p<br>owner of 20% or r | eartnerships of whice more of their voting         | ch you are a general partner;<br>securities; and any managing  |
|--|--|---|--|--|
| No   |  |   |  |  |
| Yes. List all payments to an insider.  | asternation  |   | er – alt hala talkala alta alta alta alta alta alt | TOTAL AND  |
|  | Dates of<br>payment  | Total amount paid                       | Amount you still<br>owe                            | Reason for this payment  |
|  | n fly hyg nin thi thin yethay in   |   | 5  |  |
| Insider's Name   |  | \$                                      | \$   |  |
|  |  |   |  |  |
| Number Street  | ***************************************  |   |  |  |
|  |  |   |  |  |
|  |  |   |  |  |
| City State ZIP Code  | •  |   |  |  |
| n menterial de la martin de la m<br>La martin de la mar                     | A STATE OF THE STA |   | erandanda gradida arriar arriar andares            | Francisco de la companio del companio de la companio del companio de la companio del la companio de la companio |
| Insider's Name   | -  | \$                                      | \$   |  |
| moder's remie  |  |   |  |  |
| Number Street  |  |   |  |  |
|  |  |   |  |  |
|  |  |   |  |  |
|  |  |   |  |  |
| City State ZIP Code  | ou make any pa   | yments or transi                        | fer any property o                                 | n account of a debt that benefited   |
|  |  | yments or transi                        | fer any property o                                 | n account of a debt that benefited  Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No  | y an insider.  | i Sprawaaro                             |  | ENTRÉBUSENALA NEBESSA SERVICIONAS PE   |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No  | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No  | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No<br>Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No<br>Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No<br>Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y nsider? ude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y<br>nsider?<br>ude payments on debts guaranteed or cosigned by<br>No<br>Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y nsider? ude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y nsider? ude payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider.   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y nsider?  Ide payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider.  Insider's Name  Number Street   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |
| nin 1 year before you filed for bankruptcy, did y nsider?  Ide payments on debts guaranteed or cosigned by No Yes. List all payments that benefited an insider.  Insider's Name  Number Street   | y an insider.  Dates of  | Total amount                            | Amount you still                                   | Reason for this payment  |

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| l  | Lest Nume  | Case number (# known)  |  |
|--|--|--|--|
| (K.B. Identify Legal Actio   | ons, Repossessions, and Forec  | doewae   |  |
| lithin 1 year before you filed   | l for bankruptcy, were you a party in  | any lawsuit, court action, or administrative proces  |  |
| ist all such matters, including p<br>nd contract disputes.   | personal injury cases, small claims ac   | tions, divorces, collection suits, paternity actions, supp   | ort or custody modific   |
| No '   |  |  |  |
| Yes, Fill in the details.  | Anna Mara and Anna Anna Anna Anna Anna Anna Anna   | SSE NO PERENTANA NA MANGANA ANG ANG ANG ANG ANG ANG ANG ANG A  | Nakan Kantan Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupatèn Kabupat<br>Kabupatèn Kabupatèn  |
|  | Nature of the case   | Court or agency  | Status of the car  |
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| Control of the Contro | nan ng panganan manganan nganan nganangan nganangan<br>:<br>:  | Number Street  | Concluded  |
| Case number  |  | City State ZIP Code  | n court of the   |
|  | ing a trotte a catalana a gamma a manang a mananan in ga   | SERVICE TO SERVICE STORE |  |
| No. Go to line 11.   |  |  |  |
| No. Go to line 11.<br>Yes. Fill in the information b   | elow.<br>Describe the  | property Date  | Value of the proper  |
|  | V 6 V 6 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1  | property Date  | Value of the propert   |
| Yes. Fill in the information by Creditor's Name  | Describe the   |  | Value of the proper  |
| Yes. Fill in the information b   | Describe the   | happened   | Value of the proper  |
| Yes. Fill in the information by Creditor's Name  | Describe the Explain what  | thappened by was repossessed.  | Value of the proper  |
| Yes. Fill in the information by Creditor's Name  | Explain what   | happened   | Value of the proper  |
| Yes. Fill in the information by Creditor's Name  | Explain what  Propert  Propert  Propert  | t happened<br>by was repossessed.<br>Iy was foreclosed.  | Value of the proper  |
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| Yes. Fill in the information by  Creditor's Name  Number Street  | Explain what  Propert  Propert  State ZIP Code  Propert  | t happened by was repossessed. ly was foreclosed. by was garnished. by was attached, seized, or levied.  | \$   |
| Yes. Fill in the information by  Creditor's Name  Number Street  | Explain what  Propert  Propert  State ZIP Code  Propert  | t happened by was repossessed. ly was foreclosed. by was garnished. by was attached, seized, or levied.  | Value of the propert  \$  Value of the prope  \$   |
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| thin 2 years before you filed for hankrun   | tcy, did you give any gifts or contributions with a total valu   | o of more than \$600 to any chari  |
|---|--|--|
| No  | acy, are you give any gire or contributions with a total valu  | e or more man about to any charm   |
| Yes. Fill in the details for each gift or conti   | ribution.  |  |
| Gifts or contributions to charities that total more than \$600  | Describe what you contributed  | Date you Value contributed   |
|   |  |  |
| Charity's Name  |  |  |
| ,   |  | ¢  |
|   |  |  |
| Number Street   |  |  |
|   |  |  |
| City State ZIP Code   |  |  |
|   |  |  |
| Yes. Fill in the details.   | i anna dha hagar bhagar garifa ga reag i an ghasag ga ga bhagar ag a   |  |
| Describe the property you lost and  | Describe any insurance coverage for the loss   | Date of your Value of prope  |
| Describe the property you lost and how the loss occurred  | Describe any insurance coverage for the loss include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property  | Date of your Value of proper<br>loss lost                                  |
|   | Include the amount that insurance has paid. List pending insurance   |  |
|   | Include the amount that insurance has paid. List pending insurance   |  |
| how the loss occurred   | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  |  |
| how the loss occurred  List Certain Payments or Trans   | Include the amount that insurance has paid. List pending insurance daims on line 33 of Schedule A/B: Property.   | loss iost  |
| how the loss occurred  List Certain Payments or Trans thin 1 year before you filed for bankrupto  | Include the amount that insurance has paid. List pending insurance daims on line 33 of Schedule A/B: Property.  Sters  Light or anyone else acting on your behalf pay or transport to the stern of the s | loss iost  |
| List Certain Payments or Trans hin 1 year before you filed for bankruptcy o uce any attorneys, bankruptcy petition pre  | Include the amount that insurance has paid. List pending insurance daims on line 33 of Schedule A/B: Property.  Sters  Light or anyone else acting on your behalf pay or transport to the stern of the s | loss lost \$sfer any property to anyone                                    |
| List Certain Payments or Trans thin 1 year before you filed for bankrupts to consulted about seeking bankruptcy o ude any attorneys, bankruptcy petition pre                      | Include the amount that insurance has paid. List pending insurance daims on line 33 of Schedule A/B: Property.  Sters  Cy, did you or anyone else acting on your behalf pay or trans repreparing a bankruptcy petition?  | loss lost \$sfer any property to anyone                                    |
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| List Certain Payments or Trans thin 1 year before you filed for bankruptcy o dude any attorneys, bankruptcy petition prep No Yes. Fill in the details.  Person Who Was Paid       | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Siters  Cy, did you or anyone else acting on your behalf pay or trans r preparing a bankruptcy petition? parers, or credit counseling agencies for services required in yo  | sfer any property to anyone ur bankruptcy.  Date payment or Amount of pays |
| List Certain Payments or Trans thin 1 year before you filed for bankruptcy o dude any attorneys, bankruptcy petition prep No Yes. Fill in the details.  Person Who Was Paid       | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Siters  Cy, did you or anyone else acting on your behalf pay or trans r preparing a bankruptcy petition? parers, or credit counseling agencies for services required in yo  | sfer any property to anyone ur bankruptcy.  Date payment or Amount of pays |

Email or website address

Person Who Made the Payment, if Not You

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| or 1 First Name Middle Name Las  | t Kams   | Case number (// known)   | ***************************************  |                                       |
|--|--|--|--|---------------------------------------|
| Linguagie is minnie radue 1989   | ( reme   |  |  |                                       |
|  | Description and value of any property t  | ransferred   | Date payment or transfer was made  | Amount of payment                     |
| Person Who Was Paid  |  |  |  |                                       |
| Number Street  | Offine Texts of the Control of the C | and the second s |  | · · · · · · · · · · · · · · · · · · · |
|  | -  |  |  | !                                     |
| City State ZIP Code  | -  | The state of the s |  |                                       |
| Email or website address   |  | C.O. Comment   |  |                                       |
| Person Who Made the Payment, if Not You  |  |  |  |                                       |
| Vithin 1 year before you filed for bankrup   | tcv. did you or anyone else acting on  | vour behalf pay or trans   | sfer any property to:  | anvone who                            |
| romised to help you deal with your credi<br>to not include any payment or transfer that y  |  | <del>-</del>   |  |                                       |
| Yes. Fill in the details.  |  |  |  |                                       |
|  | Description and value of any property to   | ransferred   | transfer was   | mount of paym                         |
| Person Who Was Paid  |  | Elizabeth de la la Caracter A Nelson de Personales de la companya de la companya de la companya de la companya   | made ************************************  |                                       |
| Number Street  | •  | 11 11 11 11 11 11 11 11 11 11 11 11 11   | \$   |                                       |
| City State ZIP Code  | -  | a nakimuni ma cu   | \$   |                                       |
| Vithin 2 years before you filed for bankru   | atou did you gott trado or otherwise t   | ranafas anu neanaths ta  | antiona other than   |                                       |
| ransferred in the ordinary course of your notude both outright transfers and transfers to not include gifts and transfers that you had No  Yes. Fill in the details. | made as security (such as the granting o   | f a security interest or mo  | ortgage on your prope  | erty),                                |
|  | Description and value of property transferred  | Describe any property o<br>or debts paid in exchan   |  | Date transfer<br>was made             |
| Person Who Received Transfer   |  |  |  | 1                                     |
| Number Street  |  |  |  |                                       |
| City State ZIP Code  |  | THE LAW PART IN THE PART IN TH |  |                                       |
| Person's relationship to you   |  |  |  | <i>±</i>                              |
| Person Who Received Transfer   | **************************************   |  | THE STATE OF THE S |                                       |
| Number Street  |  |  |  |                                       |
|  |  |  |  | 7                                     |
| City State ZiP Code  |  |  |  |                                       |

Person's relationship to you \_\_\_

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| are a beneficiary? (These are often called No Yes. Fill in the details.  | asset-protection devices.)  Description and value of the pro | erty transferred   | Date transfer  |
|--|--|--|--|
| Name of trust  |  |  | was made   |
| List Certain Financial Accountion 1 year before you filed for bankrulosed, sold, moved, or transferred?  | ptcy, were any financial accounts                            | or instruments held in your nam  |  |
| clude checking, savings, money marko<br>okerage houses, pension funds, coop<br>No  |  |  | nks, credit unions,  |
| Yes. Fill in the details.  |  |  | aanii oo aa kaala ka laa aa baala aa baa   |
| Yes. Fill in the details.  | Last 4 digits of account number                              | instrument closed  |  |
| Yes. Fill in the details.  Name of Financial Institution   | Last 4 digits of account number                              | instrument closed  | l, sold, moved, closing or transfe   |
|  |  | instrument closed or train  Checking Savings   | l, sold, moved, closing or transfe   |
| Name of Financial Institution  |  | instrument closed or tran  | l, sold, moved, closing or transfe   |
| Name of Financial Institution  Number Street  City State ZIP Code  |  | instrument closed or tran  Checking Savings Money market Brokerage   | l, sold, moved, closing or transfe   |
| Name of Financial Institution  Number Street   | xxxx   | instrument closed or tran  | l, sold, moved, closing or transfe   |
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| Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution   | - xxxx   | instrument closed or train  Checking Savings Money market Brokerage Other Checking Savings Money market            | l, sold, moved, closing or transfe   |
| Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution  Number Street  City State ZIP Code  Tyou now have, or did you have within curities, cash, or other valuables?    | xxxx   | instrument closed or tran  | \$\$  her depository for   |
| Name of Financial Institution  Number Street  City State ZIP Code  Name of Financial Institution  Number Street  City State ZIP Code  o you now have, or did you have within curities, cash, or other valuables?   | XXXX   | instrument closed or tran  | storred \$  \$  her depository for   |
| Name of Financial Institution  Number Street  City State ZJP Code  Name of Financial Institution  Number Street  City State ZJP Code  O you now have, or did you have within accurities, cash, or other valuables? | XXXX   | instrument closed or tran  | sold, moved, closing or transfered  \$\$  her depository for  Do you stitle have it? |

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| First Name Middle Name  | Less Name   | С  | ase number (if known)  |  |
|---|---|--|--|--|
| ave you stored property in a storag   | je unit or place other than your  | home within 1 ye   | ar before you filed for bankrup  | tcy?                                     |
| No.   |   |  |  |  |
| Yes. Fill in the details.   |   | erende de la companya de la company<br>La companya de la companya de | des la Maria de la Harra de diatamento de Maria (A. M.). Con de  |  |
|   | Who else has or had acc   | Balle III. a. Sada I Kara Balle Shi Shi Sa Ali Bara Bila Shi a   | Describe the contents  | Do you st                                |
|   |   | evi vinni i inni to j vin mijitaji)  |  | have it?                                 |
|   |   |  |  | □ No                                     |
| Name of Storage Facility  | Name  |  |  | 🔲 Yes                                    |
|   |   |  |  |  |
| Number Street   | Number Street   |  |  |  |
|   | City State ZIP Code   |  | <del></del>  | 1  |
|   | Chystate AF Code  |  | II POOR  |  |
| City State ZIP  | Code  | e e a contrata de la compansión de la comp   | tion is the second and the second second of the second second second second second second second second second | entrope to the entropy of the entropy of |
| Do you hold or control any propert<br>or hold in trust for someone.  X  | / that someone else owns? Incl  | ude any property   | you borrowed from, are storin  | g for,                                   |
| Yes. Fill in the details.   |   |  |  |  |
| res. Fai ili die details.   |   |  |  |  |
|   | Where is the property?  |  | Describe the property  | Value                                    |
|   |   |  |  |  |
| Owner's Name  | Market of the Contract of the |  |  | \$                                       |
|   | Number Street   |  |  |  |
| Number Street   |   |  |  |  |
|   |   |  |  |  |
|   | **************************************  |  |  |  |
| City Charles 70D  | City  | State ZIP Code   |  |  |
| er of the state of  | Code  | State ZIP Code   |  |  |
| er of the stands of   | Code City  Vironmental information  | State ZIP Code   | them common one amount or one. When copping to an appropriate algority, it is a few                            |  |
| Give Details About En   | ode   | State ZIP Code   |  |  |
| the purpose of Part 10, the following   | vironmental information  ng definitions apply:  | Market friedligh all hall hand had a prossible in the Language of the Community of the Comm   | a politition, contamination, vol   |  |
| the purpose of Part 10, the following   | vironmental information  ng definitions apply: ral, state, or local statute or reg  | ulation concernin  |  |  |
| the purpose of Part 10, the following Environmental law means any fede hazardous or toxic substances, wa  | vironmental information  ng definitions apply: ral, state, or local statute or reg stes, or material into the air, lar  | ulation concernin<br>d, soil, surface w  | ater, groundwater, or other me   |  |
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| Yes. Fill in the details.   Governmental unit   Environmental law, if you know it   Date of not  |
|--|
| Name of site    Number   Street   State   ZiP Code   |
| City   State   ZiP Code  |
| Number Street   Number Street   State ZIP Code   |
| City State ZIP Code  City State ZIP Code  The you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No Yes. Fill in the details.  Court or agency Nature of the case Status or Case Case Case Case Case Case Case Case   |
| City State ZIP Code  // you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency  Nature of the case  Case little  Court Name  City  State ZIP Code  Case number  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business  Employer Identification number  Do not include Social Socials number of the pusiness  Case Status or case  Status or case  Status or case  Status or case  Status or case  Status or case  Status or case  Case  Status or case  Sta |
| City State ZIP Code  // you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No  Yes. Fill in the details.  Court or agency  Nature of the case  Case little  Court Name  Case number  City State ZIP Code  Case number  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business  Employer Identification number  Do not include Social Socials number of the pusiness  Case title  Court Name  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business  Employer Identification number  |
| Ve you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.  No Yes. Fill in the details.  Court or agency Nature of the case Status of case  Case title  Court Name  City State ZiP Code  Case number  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Employer Identification number  Describe the nature of the business  Employer Identification number  Describe the nature of the business  |
| No Yes. Fill in the details.    Court or agency   Nature of the case   Status of case  |
| Yes. Fill in the details.    Court or agency   Nature of the case   Status of case   |
| Case title  Court Name  Court  |
| Case title   |
| Case number  City State ZIP Code  Give Details About Your Business or Connections to Any Business  thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  |
| Case number  City State ZIP Code  City State ZiP Co |
| Case number  City  State ZIP Code  City  City  State ZIP Code  City  State ZIP Code  City  City  City  State ZIP Code  City  City  City  City  State ZIP Code  City  City  City  City  City  City  City  Concections to Any Business  The Concection of the following connections to any business?  City  City  City  State ZIP Code  City  City  City  City  City  City  City  City  Concections to Any Business  Check all imited liability connections to Any Business  City  City  City  City  City  City  City  Concections to Any Business  Check all imited Connections to Any Business  City  City  City  City  Concections to Any Business  Check all imited Connections to Any Business  City  Concections to Any Business  Check all imited Connections to Any Business  Connections to Any Business  Connections to Any Business  Check all imited Connections to Any Business  Connections to Any Business  Check all imited Connections to Any Business  Check all |
| Give Details About Your Business or Connections to Any Business  thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number.   |
| Give Details About Your Business or Connections to Any Business  thin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?  A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  A member of a limited liability company (LLC) or limited liability partnership (LLP)  A partner in a partnership  An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number.   |
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| □ A partner in a partnership □ An officer, director, or managing executive of a corporation □ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business □ Employer Identification number □ Do not include Social Security number or II   |
| An officer, director, or managing executive of a corporation  An owner of at least 5% of the voting or equity securities of a corporation  No. None of the above applies. Go to Part 12.  Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number.  Do not include Social Security number or II.   |
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| Yes. Check all that apply above and fill in the details below for each business.  Describe the nature of the business  Employer Identification number  Do not include Social Security number or its  |
| Describe the nature of the business Employer Identification number   |
| Business Name Do not include Social Security number or in  |
|  |
| EIN:   |
| Number Street Name of accountant or bookkeeper Dates business existed  |
| reme of exconnent of connecting patters business existed   |
| From To  |
|  |
| City State ZIP Code  |
| Describe the nature of the business Employer Identification number   |
| Describe the nature of the business Employer Identification number  Business Name  Do not include Social Security number or IT   |
| Describe the nature of the business Employer Identification number   |

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| Describe the nature of the business    Employer Identification number  | 1 First Name Middle Name Last                    | Ca Ca  | se number (# known)  |
|--|--|--|--|
| Number Street    Name of accountant or bookkeeper   Dates business existed   | Business Name                                    | Describe the nature of the business  | Do not include Social Security number or ITIN.   |
| Vithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial statement your business? Include all financial statement your business? Include all financial statement your business? Include all financial state | Number Street                                    | Name of accountant or bookkeeper   |  |
| No I Yes. Fill in the details below.  Date Issued  MM / DD / YYYY  Number Street   | City State ZIP Code                              |  | From To  |
| Yes. Fill in the details below.  Date Issued  MM / DD / YYYY  Number Street  |  | ptcy, did you give a financial statement to a  | inyone about your business? Include all financial  |
| Name MM / DD / YYYY  Number Street   | No   |  |  |
| Name MM / DD / YYYY  Number Street   | Yes. Fill in the details below.                  |  |  |
| Number Street  |  | Date Issued  |  |
| Number Street  | Name   | - MM / DD / VVVV   |  |
|  |  | mai, 50, 111, 1  |  |
| City State ZIP Code  | Number Street                                    |  |  |
| City State ZIP Code  |  | -  |  |
|  | City State ZIP Code                              | -  |  |
|  |  |  |  |
|  |  |  |  |
| 421 Sign Below   | 127 Sign Below                                   | and the second s |  |
|  | n connection with a bankruptcy case ca           |  |  |
| n connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  | h/land   | 10/1   |  |
| n connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  | x ///// Masse                                    | UU *   |  |
| n connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.   | Signature of Debtor 1                            | Signature of Debtor 2  | pro-market and a second a second and a second a second and a second and a second and a second and a second an |
| n connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.   | Date 8/2/2018                                    | Date   |  |
| n connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Signature of Debtor 2   | Niel attach additional agent to Value            |  | ls Filing for Bankruptcy (Official Form 107)?  |
| In connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  Date \[ \frac{\frac{1}{2}\lambda \frac{1}{2}\lambda}{\frac{1}{2}\lambda \frac{1}{2}\lambda} \]  Date \[ \frac{\frac{1}{2}\lambda \frac{1}{2}\lambda}{\frac{1}{2}\lambda \frac{1}{2}\lambda} \]  Date \[ \frac{\frac{1}{2}\lambda \frac{1}{2}\lambda}{\frac{1}{2}\lambda \frac{1}{2}\lambda} \]   | old you attach additional pages to <i>four</i> . |  |  |
| Signature of Debtor 1  Signature of Debtor 2   | <b>L</b>   |  |  |

No.

Yes. Name of person\_

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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| Fill in this int                | ormation to identil      | y your case             | a a una cara de un arredo de la         |            |
|---------------------------------|--------------------------|-------------------------|---|------------|
| Debtor 1                        | Wynne<br>First Name      | Middle Name             | Scott<br>Last Name                      |            |
| Debtor 2<br>(Spouse, if filing) | First Name               | Middle Name             | Last Name                               | ********** |
| United States £                 | Bankruptcy Court for the | e: Northern District of | Illinois                                |            |
| Case number<br>(If known)       |                          |                         | *************************************** |            |
|                                 |                          |                         |   |            |

Check if this is an amended filing

12/15

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Pani 18 List Your C

#### List Your Creditors Who Have Secured Claims

| Identify the creditor and the property that is collateral   | What do you intend to do with the property that secures a debt?  | Did you claim the property<br>as exempt on Schedule C |
|---|--|---|
| Creditor's  | ☐ Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               | ☐ Yes   |
| Description of property securing debt:  | Retain the property and enter into a<br>Reaffirmation Agreement. |   |
| NA  | Retain the property and [explain]:                               |   |
| Creditor's  | Surrender the property.  | □ No  |
| name:   | Retain the property and redeem it.                               | Yes   |
| Description of<br>property<br>securing debt:  | Retain the property and enter into a<br>Reaffirmation Agreement. |   |
| · ·   | Retain the property and [explain]:                               |   |
| Creditor's  | Surrender the property.  | O No  |
| name:   | Retain the property and redeem it.                               | TYes  |
| Description of<br>property<br>securing debt:  | Retain the property and enter into a Reaffirmation Agreement.    |   |
| •   | Retain the property and [explain]:                               |   |
| Creditor's  | Q Surrender the property.  | Q No  |
| <b>name:</b><br>Reproductive de Securit de Comment | Retain the property and redeem it.                               | Q Yes   |
| Description of<br>property<br>securing debt:  | Retain the property and enter into a<br>Reaffirmation Agreement. |   |
| n n naver 🤫 Araman  | Retain the property and [explain]:                               |   |

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Debtor 1

Wyme Scott
Fast Name Middle Name Last Name

Case number (ff known)\_\_\_\_\_

| escribe your unexpired personal property leases ssor's name: scription of leased sperty: ssor's name: scription of leased sperty: ssor's name: scription of leased sperty: ssor's name: | Will the lease be assumed?  No Yes  No Yes  No Yes   |
|---|--|
| scription of leased operty: ssor's name: scription of leased operty: ssor's name; scription of leased operty:   | ☐ Yes ☐ No ☐ Yes ☐ No  |
| scription of leased operty: ssor's name: scription of leased operty: ssor's name; scription of leased operty:   | ☐ No<br>☐ Yes  |
| ssor's name; scription of leased operty: ssor's name; scription of leased operty:   | ☐ Yes  |
| scription of leased sperty: ssor's name; scription of leased sperty;  |  |
| scription of leased<br>perty:   | Mark Control of the C |
| perty:  | 🗖 Yes  |
|   |  |
|   | □ No   |
| scription of leased<br>operty:  | ·· Li Yes  |
| ssor's name:  | О №  |
| scription of leased<br>perty:   | ··· Q Yes  |
| ssor's name:  | Q No   |
| scription of leased<br>perty:   | ☐ Yes  |
| ssor's name:  | Q No   |
| scription of leased<br>perty:   | <sup>™</sup> ☐ Yes   |

Signature of Debtor 1 Signature of Debtor 2